



Joe Davenport
Mayor

CITY OF LA GRANGE

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La Grange, KY 40031
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Frank Conway
Chief of Police

COMPENSATION TAX ANNUAL RECONCILIATION FORM

Business name _____
Address _____
City/State/Zip _____
Account # _____

For year ending _____
Date due January 31 _____
Federal ID/SS # _____
Phone # _____

Payments

1st quarter (1/1 thru 3/31) payment _____

2nd quarter (4/1 thru 6/30) payment _____

3rd quarter (7/1 thru 9/30) payment _____

4th quarter (10/1 thru 12/31) payment _____

TOTAL _____

Signed _____

Official Title _____

Print Name _____

Date _____