CLAY PROPERTY TAX RETURN

For Assessment as of January 1, _____

File a separate return for each county.

File by April 16 with:

Department of Revenue Office of Property Valuation Station 33 501 High Street Frankfort, Kentucky 40601-2103

Filer Name				County
Address				Social Security No.
City	State	ZIP Code	Telephone No.	FIN
			()	

ACTIVE PROPERTY:

Map ID	Owner's Name	Owner's Address	Percent Ownership	Product Tons in Prior Year	Royalty Rate

INACTIVE PROPERTY:

Map ID	Owner's Name	Owner's Address	Percent Ownership	Permitted Acres	Idle Acreage

LEASE TERMINATED DURING THE PRIOR YEAR:

Map ID	Owner's Name	Owner's Address	Acres	Reason for Termination

PROPERTY SOLD OR PURCHASED DURING THE PRIOR YEAR:

Map ID	Grantor	Grantee	Total Value	Clay Value	Db/Pg

VERIFICATION

Under penalties of perjury, I do solemnly swear or affirm that I have examined this report, including accompanying schedules, statements and maps, and to the best of my knowledge, information and belief, it is a true, correct and complete return. I acknowledge under these same conditions that any and all documentation supporting and/or requesting an assessment is incorporated by reference into this return and made a part hereof.