

COUNTY CLERK'S CLAIM  
FOR PREPARING OMITTED TAX BILLS



Clerk \_\_\_\_\_

Voucher No. \_\_\_\_\_

County \_\_\_\_\_

Account No. \_\_\_\_\_

Address \_\_\_\_\_

Disburse \$ \_\_\_\_\_

For Year Ending July 31, 20 \_\_\_\_\_

**NOTE:** Submit *two copies* to the Department of Revenue, Office of Property Valuation, P.O. Box 1727, Frankfort, Kentucky 40602-1727, at the time the sheriff makes his annual settlement but not later than July 31 of each year.

Total "Omitted Tax Bills" (Revenue Form 62A301-S)..... @ \$1.00 each ..... \$ \_\_\_\_\_

**Prepared and Charged** to Sheriff for year  
beginning August 1, 20\_\_\_\_ through July 31, 20\_\_\_\_ .....

One-half to be paid by County..... - \_\_\_\_\_

One-half to be paid by Commonwealth of Kentucky ..... \$ \_\_\_\_\_

I certify that services were rendered by me for which I am entitled to the compensation stated above; that I have not received any of this compensation from the state.

I further certify that the order for the \_\_\_\_\_ Fiscal Court, allowing the county clerk's claim, entered on Order Book No. \_\_\_\_\_, Page \_\_\_\_\_, authorized the payment of \$ \_\_\_\_\_ as the county's share of the clerk's compensation for making tax bills as set out in KRS 133.240.

\_\_\_\_\_  
Clerk \_\_\_\_\_ County

Subscribed and sworn to before me by \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ .

My commission expires \_\_\_\_\_

\_\_\_\_\_  
Signature \_\_\_\_\_ Title

Approved for \$ \_\_\_\_\_

Approved for \$ \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_