



### Request for Extension of Reports and/or ACH Call-in

**Fax (502) 564-2906**

County \_\_\_\_\_

**Clerk Name** \_\_\_\_\_

**Address** \_\_\_\_\_

**Contact Person (Full Name)** \_\_\_\_\_

**Telephone #** (    )    -   

Fax # ( ) -

**Week #** \_\_\_\_\_

**Date of Collection**    \_\_ \_\_ / \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_

**Amount of Collection \$** \_\_\_\_\_ . \_\_\_\_\_

**Date of ACH Call-in**    \_\_ \_\_ / \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_  
(Date the extension is being requested for)

Reason (Please be specific) \_\_\_\_\_