

EMPLOYER'S QUARTERLY RETURN OF TAX WITHHELD

Under Ordinance No. 979 Passed December 7, 1970

Form W-1

- 1. Number of Taxable Employees..... _____
- 2. Total Salaries, Wages, Commissions and other Compensation Paid all Employees..... \$ _____
- 3. Less: Non-Taxable Items (Compensation Paid Non-Residents for Services outside and to persons under age 18)..... _____
- 4. Taxable Earnings (Item 2 minus Item 3)..... _____
- 5. Actual Tax Withheld at one and one-half percent... \$ _____
- 6. Adjustment of Tax for Prior Quarter..... _____
- 7. Interest (1/2 of 1% per month)..... _____
- 8. Penalty (50% of Unpaid Tax)..... _____
- 9. Total (Include Interest and Penalty due)..... \$ _____

MAKE CHECK, DRAFT OR MONEY ORDER PAYABLE TO: **CROOKSVILLE INCOME TAX** AND MAIL WITH COMPLETE RETURN. All information and correspondence regarding this return should be addressed to
 Crooksville Income Tax
 98 South Buckeye Street
 Crooksville, OH 43731.

**FOR MONTH ENDING
 January 31, 2018**

**DUE ON OR BEFORE
 February 15, 2018**

Business Name: _____
FID: _____

I hereby certify that information and statements contained herein and in any schedules or exhibits attached are true and correct.

Signature

Title

Date

EMPLOYER'S QUARTERLY RETURN OF TAX WITHHELD

Under Ordinance No. 979 Passed December 7, 1970

Form W-1

- 1. Number of Taxable Employees..... _____
- 2. Total Salaries, Wages, Commissions and other Compensation Paid all Employees..... \$ _____
- 3. Less: Non-Taxable Items (Compensation Paid Non-Residents for Services outside and to persons under age 18)..... _____
- 4. Taxable Earnings (Item 2 minus Item 3)..... _____
- 5. Actual Tax Withheld at one and one-half percent... \$ _____
- 6. Adjustment of Tax for Prior Quarter..... _____
- 7. Interest (1/2 of 1% per month)..... _____
- 8. Penalty (50% of Unpaid Tax)..... _____
- 9. Total (Include Interest and Penalty due)..... \$ _____

MAKE CHECK, DRAFT OR MONEY ORDER PAYABLE TO: **CROOKSVILLE INCOME TAX** AND MAIL WITH COMPLETE RETURN. All information and correspondence regarding this return should be addressed to
 Crooksville Income Tax
 98 South Buckeye Street
 Crooksville, OH 43731.

**FOR MONTH ENDING
 February 28, 2018**

**DUE ON OR BEFORE
 March 15, 2018**

Business Name: _____
FID: _____

I hereby certify that information and statements contained herein and in any schedules or exhibits attached are true and correct.

Signature

Title

Date

EMPLOYER'S QUARTERLY RETURN OF TAX WITHHELD

Under Ordinance No. 979 Passed December 7, 1970

Form W-1

- 1. Number of Taxable Employees..... _____
- 2. Total Salaries, Wages, Commissions and other Compensation Paid all Employees..... \$ _____
- 3. Less: Non-Taxable Items (Compensation Paid Non-Residents for Services outside and to persons under age 18)..... _____
- 4. Taxable Earnings (Item 2 minus Item 3)..... _____
- 5. Actual Tax Withheld at one and one-half percent... \$ _____
- 6. Adjustment of Tax for Prior Quarter..... _____
- 7. Interest (1/2 of 1% per month)..... _____
- 8. Penalty (50% of Unpaid Tax)..... _____
- 9. Total (Include Interest and Penalty due)..... \$ _____

MAKE CHECK, DRAFT OR MONEY ORDER
 PAYABLE TO: **CROOKSVILLE INCOME TAX**
 AND MAIL WITH COMPLETE RETURN. All information and correspondence regarding this return should be addressed to
 Crooksville Income Tax
 98 South Buckeye Street
 Crooksville, OH 43731.

**FOR MONTH ENDING
 March 31, 2018**

**DUE ON OR BEFORE
 April 15, 2018**

Business Name: _____

FID: _____

I hereby certify that information and statements contained herein and in any schedules or exhibits attached are true and correct.

 Signature Title Date

EMPLOYER'S QUARTERLY RETURN OF TAX WITHHELD

Under Ordinance No. 979 Passed December 7, 1970

Form W-1

- 1. Number of Taxable Employees..... _____
- 2. Total Salaries, Wages, Commissions and other Compensation Paid all Employees..... \$ _____
- 3. Less: Non-Taxable Items (Compensation Paid Non-Residents for Services outside and to persons under age 18)..... _____
- 4. Taxable Earnings (Item 2 minus Item 3)..... _____
- 5. Actual Tax Withheld at one and one-half percent... \$ _____
- 6. Adjustment of Tax for Prior Quarter..... _____
- 7. Interest (1/2 of 1% per month)..... _____
- 8. Penalty (50% of Unpaid Tax)..... _____
- 9. Total (Include Interest and Penalty due)..... \$ _____

MAKE CHECK, DRAFT OR MONEY ORDER
 PAYABLE TO: **CROOKSVILLE INCOME TAX**
 AND MAIL WITH COMPLETE RETURN. All information and correspondence regarding this return should be addressed to
 Crooksville Income Tax
 98 South Buckeye Street
 Crooksville, OH 43731.

**FOR MONTH ENDING
 April 30, 2018**

**DUE ON OR BEFORE
 May 15, 2018**

Business Name: _____

FID: _____

I hereby certify that information and statements contained herein and in any schedules or exhibits attached are true and correct.

 Signature Title Date

EMPLOYER'S QUARTERLY RETURN OF TAX WITHHELD

Under Ordinance No. 979 Passed December 7, 1970

Form W-1

- 1. Number of Taxable Employees..... _____
- 2. Total Salaries, Wages, Commissions and
other Compensation Paid all Employees..... \$ _____
- 3. Less: Non-Taxable Items (Compensation Paid
Non-Residents for Services outside and to
persons under age 18)..... _____
- 4. Taxable Earnings (Item 2 minus Item 3)..... _____
- 5. Actual Tax Withheld at one and one-half percent... \$ _____
- 6. Adjustment of Tax for Prior Quarter..... _____
- 7. Interest (1/2 of 1% per month)..... _____
- 8. Penalty (50% of Unpaid Tax)..... _____
- 9. Total (Include Interest and Penalty due)..... \$ _____

MAKE CHECK, DRAFT OR MONEY ORDER
 PAYABLE TO: **CROOKSVILLE INCOME TAX**
 AND MAIL WITH COMPLETE RETURN. All
 information and correspondence regarding this re-
 turn should be addressed to
 Crooksville Income Tax
 98 South Buckeye Street
 Crooksville, OH 43731.

FOR MONTH ENDING May 31, 2018
DUE ON OR BEFORE June 15, 2018

Business Name: _____
FID: _____

I hereby certify that information and statements contained herein and in any schedules or exhibits attached are true and correct.

 Signature Title Date

EMPLOYER'S QUARTERLY RETURN OF TAX WITHHELD

Under Ordinance No. 979 Passed December 7, 1970

Form W-1

- 1. Number of Taxable Employees..... _____
- 2. Total Salaries, Wages, Commissions and
other Compensation Paid all Employees..... \$ _____
- 3. Less: Non-Taxable Items (Compensation Paid
Non-Residents for Services outside and to
persons under age 18)..... _____
- 4. Taxable Earnings (Item 2 minus Item 3)..... _____
- 5. Actual Tax Withheld at one and one-half percent... \$ _____
- 6. Adjustment of Tax for Prior Quarter..... _____
- 7. Interest (1/2 of 1% per month)..... _____
- 8. Penalty (50% of Unpaid Tax)..... _____
- 9. Total (Include Interest and Penalty due)..... \$ _____

MAKE CHECK, DRAFT OR MONEY ORDER
 PAYABLE TO: **CROOKSVILLE INCOME TAX**
 AND MAIL WITH COMPLETE RETURN. All
 information and correspondence regarding this re-
 turn should be addressed to
 Crooksville Income Tax
 98 South Buckeye Street
 Crooksville, OH 43731.

FOR MONTH ENDING June 30, 2018
DUE ON OR BEFORE July 15, 2018

Business Name: _____
FID: _____

I hereby certify that information and statements contained herein and in any schedules or exhibits attached are true and correct.

 Signature Title Date

EMPLOYER'S QUARTERLY RETURN OF TAX WITHHELD

Under Ordinance No. 979 Passed December 7, 1970

Form W-1

- 1. Number of Taxable Employees..... _____
- 2. Total Salaries, Wages, Commissions and
other Compensation Paid all Employees..... \$ _____
- 3. Less: Non-Taxable Items (Compensation Paid
Non-Residents for Services outside and to
persons under age 18)..... _____
- 4. Taxable Earnings (Item 2 minus Item 3)..... _____
- 5. Actual Tax Withheld at one and one-half percent... \$ _____
- 6. Adjustment of Tax for Prior Quarter..... _____
- 7. Interest (1/2 of 1% per month)..... _____
- 8. Penalty (50% of Unpaid Tax)..... _____
- 9. Total (Include Interest and Penalty due)..... \$ _____

MAKE CHECK, DRAFT OR MONEY ORDER
 PAYABLE TO: **CROOKSVILLE INCOME TAX**
 AND MAIL WITH COMPLETE RETURN. All
 information and correspondence regarding this re-
 turn should be addressed to
 Crooksville Income Tax
 98 South Buckeye Street
 Crooksville, OH 43731.

**FOR MONTH ENDING
July 31, 2018**

**DUE ON OR BEFORE
August 15, 2018**

Business Name: _____
FID: _____

I hereby certify that information and statements contained herein and in any schedules or exhibits attached are true and correct.

Signature

Title

Date

EMPLOYER'S QUARTERLY RETURN OF TAX WITHHELD

Under Ordinance No. 979 Passed December 7, 1970

Form W-1

- 1. Number of Taxable Employees..... _____
- 2. Total Salaries, Wages, Commissions and
other Compensation Paid all Employees..... \$ _____
- 3. Less: Non-Taxable Items (Compensation Paid
Non-Residents for Services outside and to
persons under age 18)..... _____
- 4. Taxable Earnings (Item 2 minus Item 3)..... _____
- 5. Actual Tax Withheld at one and one-half percent... \$ _____
- 6. Adjustment of Tax for Prior Quarter..... _____
- 7. Interest (1/2 of 1% per month)..... _____
- 8. Penalty (50% of Unpaid Tax)..... _____
- 9. Total (Include Interest and Penalty due)..... \$ _____

MAKE CHECK, DRAFT OR MONEY ORDER
 PAYABLE TO: **CROOKSVILLE INCOME TAX**
 AND MAIL WITH COMPLETE RETURN. All
 information and correspondence regarding this re-
 turn should be addressed to
 Crooksville Income Tax
 98 South Buckeye Street
 Crooksville, OH 43731.

**FOR MONTH ENDING
August 31, 2018**

**DUE ON OR BEFORE
September 15,**

Business Name: _____
FID: _____

I hereby certify that information and statements contained herein and in any schedules or exhibits attached are true and correct.

Signature

Title

Date

EMPLOYER'S QUARTERLY RETURN OF TAX WITHHELD

Under Ordinance No. 979 Passed December 7, 1970

Form W-1

- 1. Number of Taxable Employees..... _____
- 2. Total Salaries, Wages, Commissions and
other Compensation Paid all Employees..... \$ _____
- 3. Less: Non-Taxable Items (Compensation Paid
Non-Residents for Services outside and to
persons under age 18)..... _____
- 4. Taxable Earnings (Item 2 minus Item 3)..... _____
- 5. Actual Tax Withheld at one and one-half percent... \$ _____
- 6. Adjustment of Tax for Prior Quarter..... _____
- 7. Interest (1/2 of 1% per month)..... _____
- 8. Penalty (50% of Unpaid Tax)..... _____
- 9. Total (Include Interest and Penalty due)..... \$ _____

MAKE CHECK, DRAFT OR MONEY ORDER
 PAYABLE TO: **CROOKSVILLE INCOME TAX**
 AND MAIL WITH COMPLETE RETURN. All
 information and correspondence regarding this re-
 turn should be addressed to
 Crooksville Income Tax
 98 South Buckeye Street
 Crooksville, OH 43731.

FOR MONTH ENDING
September 30, 2018

DUE ON OR BEFORE
October 15, 2018

Business Name: _____

FID: _____

I hereby certify that information and statements contained herein and in any schedules or exhibits attached are true and correct.

Signature

Title

Date

EMPLOYER'S QUARTERLY RETURN OF TAX WITHHELD

Under Ordinance No. 979 Passed December 7, 1970

Form W-1

- 1. Number of Taxable Employees..... _____
- 2. Total Salaries, Wages, Commissions and
other Compensation Paid all Employees..... \$ _____
- 3. Less: Non-Taxable Items (Compensation Paid
Non-Residents for Services outside and to
persons under age 18)..... _____
- 4. Taxable Earnings (Item 2 minus Item 3)..... _____
- 5. Actual Tax Withheld at one and one-half percent... \$ _____
- 6. Adjustment of Tax for Prior Quarter..... _____
- 7. Interest (1/2 of 1% per month)..... _____
- 8. Penalty (50% of Unpaid Tax)..... _____
- 9. Total (Include Interest and Penalty due)..... \$ _____

MAKE CHECK, DRAFT OR MONEY ORDER
 PAYABLE TO: **CROOKSVILLE INCOME TAX**
 AND MAIL WITH COMPLETE RETURN. All
 information and correspondence regarding this re-
 turn should be addressed to
 Crooksville Income Tax
 98 South Buckeye Street
 Crooksville, OH 43731.

FOR MONTH ENDING
October 31, 2018

DUE ON OR BEFORE
November 15, 2018

Business Name: _____

FID: _____

I hereby certify that information and statements contained herein and in any schedules or exhibits attached are true and correct.

Signature

Title

Date

EMPLOYER'S QUARTERLY RETURN OF TAX WITHHELD

Under Ordinance No. 979 Passed December 7, 1970

Form W-1

- 1. Number of Taxable Employees..... _____
- 2. Total Salaries, Wages, Commissions and other Compensation Paid all Employees..... \$ _____
- 3. Less: Non-Taxable Items (Compensation Paid Non-Residents for Services outside and to persons under age 18)..... _____
- 4. Taxable Earnings (Item 2 minus Item 3)..... _____
- 5. Actual Tax Withheld at one and one-half percent... \$ _____
- 6. Adjustment of Tax for Prior Quarter..... _____
- 7. Interest (1/2 of 1% per month)..... _____
- 8. Penalty (50% of Unpaid Tax)..... _____
- 9. Total (Include Interest and Penalty due)..... \$ _____

MAKE CHECK, DRAFT OR MONEY ORDER
 PAYABLE TO: **CROOKSVILLE INCOME TAX**
 AND MAIL WITH COMPLETE RETURN. All
 information and correspondence regarding this re-
 turn should be addressed to
 Crooksville Income Tax
 98 South Buckeye Street
 Crooksville, OH 43731.

**FOR MONTH ENDING
November 30, 2018**

**DUE ON OR BEFORE
December 15, 2018**

Business Name: _____
FID: _____

I hereby certify that information and statements contained herein and in any schedules or exhibits attached are true and correct.

 Signature Title Date

EMPLOYER'S QUARTERLY RETURN OF TAX WITHHELD

Under Ordinance No. 979 Passed December 7, 1970

Form W-1

- 1. Number of Taxable Employees..... _____
- 2. Total Salaries, Wages, Commissions and other Compensation Paid all Employees..... \$ _____
- 3. Less: Non-Taxable Items (Compensation Paid Non-Residents for Services outside and to persons under age 18)..... _____
- 4. Taxable Earnings (Item 2 minus Item 3)..... _____
- 5. Actual Tax Withheld at one and one-half percent... \$ _____
- 6. Adjustment of Tax for Prior Quarter..... _____
- 7. Interest (1/2 of 1% per month)..... _____
- 8. Penalty (50% of Unpaid Tax)..... _____
- 9. Total (Include Interest and Penalty due)..... \$ _____

MAKE CHECK, DRAFT OR MONEY ORDER
 PAYABLE TO: **CROOKSVILLE INCOME TAX**
 AND MAIL WITH COMPLETE RETURN. All
 information and correspondence regarding this re-
 turn should be addressed to
 Crooksville Income Tax
 98 South Buckeye Street
 Crooksville, OH 43731.

**FOR MONTH ENDING
December 31, 2018**

**DUE ON OR BEFORE
January 15, 2019**

Business Name: _____
FID: _____

I hereby certify that information and statements contained herein and in any schedules or exhibits attached are true and correct.

 Signature Title Date