

FORM W1

EMPLOYER'S WITHHOLDING - MONTHLY

1. Number of Taxable Employees.
2. Total Salaries, Wages, Commissions and other Compensation paid all employees.
3. Taxable Earnings (from line 2).
4. Actual Tax Withheld at 0.000 %.
5. Adjustments of Tax for Prior Period.
6. 0.50% per month.
7. 50%.
8. Total (Include Interest and Penalty if Due).

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Name

And

Address



Tax Year 2023

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

Signed

Title _____ Date _____

Phone # _____

THIS RETURN MUST BE FILED ON
OR BEFORE 15, 2023

MAKE CHECK OR MONEY ORDER TO:

COLUMBIA TWP JEDZ TAX OFFICE

5903 HAWTHORNE AVE

CINCINNATI OH 45227-3630

Voice 513-272-9954 Ext

Fax 513-561-5748

Period Ending

TAX ID

NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.

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FORM W1 1114 9929

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