

1. Number of Taxable Employees.....	1	
2. Total Salaries, Wages, Commissions and other Compensation paid all employees.....	2	
3. Taxable Earnings (from line 2).....	3	
4. Actual Tax Withheld at 1.000 %.....	4	
5. Adjustments of Tax for Prior Period.....	5	
6. Total (Include Interest and Penalty if Due).....	6	

Name

And

Address

**Tax Year 2010**

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 MAY 15, 2010**

**MAKE CHECK OR MONEY ORDER TO:**  
CITY OF WAVERLY, INCOME TAX DEPARTMENT  
P.O. BOX 427  
WAVERLY OH 45690

Voice 740-947-8177 Fax 740-947-1852

Period Ending APRIL

TAX ID

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

1. Number of Taxable Employees.....	1	
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4. Actual Tax Withheld at 1.000 %.....	4	
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6. Total (Include Interest and Penalty if Due).....	6	

Name

And

Address

**Tax Year 2010**

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 JUNE 15, 2010**

**MAKE CHECK OR MONEY ORDER TO:**  
CITY OF WAVERLY, INCOME TAX DEPARTMENT  
P.O. BOX 427  
WAVERLY OH 45690

Voice 740-947-8177 Fax 740-947-1852

Period Ending MAY

TAX ID

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

1. Number of Taxable Employees.....	1	
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6. Total (Include Interest and Penalty if Due).....	6	

Name

And

Address

**Tax Year 2010**

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 JULY 15, 2010**

**MAKE CHECK OR MONEY ORDER TO:**  
CITY OF WAVERLY, INCOME TAX DEPARTMENT  
P.O. BOX 427  
WAVERLY OH 45690

Voice 740-947-8177 Fax 740-947-1852

Period Ending JUNE

TAX ID

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