

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. 0.50% per month or fraction of a month.	6	
7. Late Payment Penalty - 50% of unpaid ta due	7	
8. Total (Include Interest and Penalty if Due).	8	

Name

And

Address

Tax Year 2018
 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 FEBRUARY 15, 2018
MAKE CHECK OR MONEY ORDER TO:
 WAVERLY INCOME TAX DEPARTMENT
 P.O. BOX 48
 WAVERLY OH 45690
 Voice 740-947-8177 Fax 740-947-1852

Period Ending JANUARY

TAX ID

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

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. 0.50% per month or fraction of a month.	6	
7. Late Payment Penalty - 50% of unpaid ta due	7	
8. Total (Include Interest and Penalty if Due).	8	

Name

And

Address

Tax Year 2018
 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 MARCH 15, 2018
MAKE CHECK OR MONEY ORDER TO:
 WAVERLY INCOME TAX DEPARTMENT
 P.O. BOX 48
 WAVERLY OH 45690
 Voice 740-947-8177 Fax 740-947-1852

Period Ending FEBRUARY

TAX ID

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

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. 0.50% per month or fraction of a month.	6	
7. Late Payment Penalty - 50% of unpaid ta due	7	
8. Total (Include Interest and Penalty if Due).	8	

Name

And

Address

Tax Year 2018
 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 APRIL 15, 2018
MAKE CHECK OR MONEY ORDER TO:
 WAVERLY INCOME TAX DEPARTMENT
 P.O. BOX 48
 WAVERLY OH 45690
 Voice 740-947-8177 Fax 740-947-1852

Period Ending MARCH

TAX ID

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

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. 0.50% per month or fraction of a month.....	6	
7. Late Payment Penalty - 50% of unpaid ta due.....	7	
8. Total (Include Interest and Penalty if Due).....	8	

Tax Year 2018

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, 2018**

MAKE CHECK OR MONEY ORDER TO:
WAVERLY INCOME TAX DEPARTMENT
P.O. BOX 48
WAVERLY OH 45690

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

Name

And

Address

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	
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. 0.50% per month or fraction of a month.....	6	
7. Late Payment Penalty - 50% of unpaid ta due.....	7	
8. Total (Include Interest and Penalty if Due).....	8	

Tax Year 2018

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, 2018**

MAKE CHECK OR MONEY ORDER TO:
WAVERLY INCOME TAX DEPARTMENT
P.O. BOX 48
WAVERLY OH 45690

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

Name

And

Address

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	
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. 0.50% per month or fraction of a month.....	6	
7. Late Payment Penalty - 50% of unpaid ta due.....	7	
8. Total (Include Interest and Penalty if Due).....	8	

Tax Year 2018

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, 2018**

MAKE CHECK OR MONEY ORDER TO:
WAVERLY INCOME TAX DEPARTMENT
P.O. BOX 48
WAVERLY OH 45690

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

Name

And

Address

Period Ending JUNE

TAX ID

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

EMPLOYER'S WITHHOLDING - MONTHLY

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. 0.50% per month or fraction of a month	6	
7. Late Payment Penalty - 50% of unpaid ta due	7	
8. Total (Include Interest and Penalty if Due)	8	

Name
And
Address

Tax Year 2018

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 AUGUST 15, 2018**

MAKE CHECK OR MONEY ORDER TO:
WAVERLY INCOME TAX DEPARTMENT
P.O. BOX 48
WAVERLY OH 45690

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

Period Ending JULY

TAX ID

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

EMPLOYER'S WITHHOLDING - MONTHLY

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. 0.50% per month or fraction of a month	6	
7. Late Payment Penalty - 50% of unpaid ta due	7	
8. Total (Include Interest and Penalty if Due)	8	

Name
And
Address

Tax Year 2018

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 SEPTEMBER 15, 2018**

MAKE CHECK OR MONEY ORDER TO:
WAVERLY INCOME TAX DEPARTMENT
P.O. BOX 48
WAVERLY OH 45690

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

Period Ending AUGUST

TAX ID

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

EMPLOYER'S WITHHOLDING - MONTHLY

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. 0.50% per month or fraction of a month	6	
7. Late Payment Penalty - 50% of unpaid ta due	7	
8. Total (Include Interest and Penalty if Due)	8	

Name
And
Address

Tax Year 2018

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 OCTOBER 15, 2018**

MAKE CHECK OR MONEY ORDER TO:
WAVERLY INCOME TAX DEPARTMENT
P.O. BOX 48
WAVERLY OH 45690

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

Period Ending SEPTEMBER

TAX ID

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

EMPLOYER'S WITHHOLDING - MONTHLY

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. 0.50% per month or fraction of a month	6	
7. Late Payment Penalty - 50% of unpaid ta due	7	
8. Total (Include Interest and Penalty if Due)	8	

Tax Year 2018

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 NOVEMBER 15, 2018

MAKE CHECK OR MONEY ORDER TO:

WAVERLY INCOME TAX DEPARTMENT
P.O. BOX 48
WAVERLY OH 45690

Voice 740-947-8177

Fax 740-947-1852

Name

And

Address

Period Ending OCTOBER

TAX ID

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

EMPLOYER'S WITHHOLDING - MONTHLY

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. 0.50% per month or fraction of a month	6	
7. Late Payment Penalty - 50% of unpaid ta due	7	
8. Total (Include Interest and Penalty if Due)	8	

Tax Year 2018

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 DECEMBER 15, 2018

MAKE CHECK OR MONEY ORDER TO:

WAVERLY INCOME TAX DEPARTMENT
P.O. BOX 48
WAVERLY OH 45690

Voice 740-947-8177

Fax 740-947-1852

Name

And

Address

Period Ending NOVEMBER

TAX ID

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

EMPLOYER'S WITHHOLDING - MONTHLY

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. 0.50% per month or fraction of a month	6	
7. Late Payment Penalty - 50% of unpaid ta due	7	
8. Total (Include Interest and Penalty if Due)	8	

Tax Year 2018

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 JANUARY 15, 2019

MAKE CHECK OR MONEY ORDER TO:

WAVERLY INCOME TAX DEPARTMENT
P.O. BOX 48
WAVERLY OH 45690

Voice 740-947-8177

Fax 740-947-1852

Name

And

Address

Period Ending DECEMBER

TAX ID

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