

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	
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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.