

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 0.000 %.	4		
5. Adjustments of Tax for Prior Period.	5		
6. 0.42% per month or fraction of month.	6		
7. Late Payment Pen-50% of unpaid tax due Plus \$25.00 month.	7		
8. Total (Include Interest and Penalty if Due).	8		

Tax Year 2022

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 30, 2022**

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 JAN-FEB-MAR

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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Name
And
Address

Tax Year 2022

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 31, 2022**

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 APR-MAY-JUN

TAX ID

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

FORM W 1 1109 EMPLOYER'S W ITHHOLDING - QUARTERLY

1. Number of Taxable Employees.	1	
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8. Total (Include Interest and Penalty if Due).	8	

Name
And
Address

Tax Year 2022

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 31, 2022**

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 JUL-AUG-SEP

TAX ID

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

FORM W 1 1109 EMPLOYER'S W ITHHOLDING - QUARTERLY

1. Number of Taxable Employees.	1	
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8. Total (Include Interest and Penalty if Due).	8	

Name
And
Address

Tax Year 2022

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 31, 2023**

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 OCT-NOV-DEC

TAX ID

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