

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 0.900 %.	4		
5. Adjustments of Tax for Prior Period.	5		
6. Interest.	6		
7. Penalty.	7		
8. Total (Include Interest and Penalty if Due).	8		

Name

And

Address

Tax Year 2004

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 _____

THIS RETURN MUST BE FILED ON OR BEFORE FEBRUARY 15, 2004

MAKE CHECK OR MONEY ORDER TO:

VILLAGE OF EVENDALE
10500 READING RD
EVENDALE OH 45241

Voice 513-563-2671 Fax 513-563-2244

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 0.900 %.	4		
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6. Interest.	6		
7. Penalty.	7		
8. Total (Include Interest and Penalty if Due).	8		

Name

And

Address

Tax Year 2004

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 _____

THIS RETURN MUST BE FILED ON OR BEFORE MARCH 15, 2004

MAKE CHECK OR MONEY ORDER TO:

VILLAGE OF EVENDALE
10500 READING RD
EVENDALE OH 45241

Voice 513-563-2671 Fax 513-563-2244

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		
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5. Adjustments of Tax for Prior Period.	5		
6. Interest.	6		
7. Penalty.	7		
8. Total (Include Interest and Penalty if Due).	8		

Name

And

Address

Tax Year 2004

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 _____

THIS RETURN MUST BE FILED ON OR BEFORE APRIL 15, 2004

MAKE CHECK OR MONEY ORDER TO:

VILLAGE OF EVENDALE
10500 READING RD
EVENDALE OH 45241

Voice 513-563-2671 Fax 513-563-2244

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 0.900 %.	4		
5. Adjustments of Tax for Prior Period.	5		
6. Interest.	6		
7. Penalty.	7		
8. Total (Include Interest and Penalty if Due).	8		

Name
And
Address

Tax Year 2004

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 _____

THIS RETURN MUST BE FILED ON OR BEFORE MAY 15, 2004

MAKE CHECK OR MONEY ORDER TO:

VILLAGE OF EVENDALE
10500 READING RD
EVENDALE OH 45241

Voice 513-563-2671 Fax 513-563-2244

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 0.900 %.	4		
5. Adjustments of Tax for Prior Period.	5		
6. Interest.	6		
7. Penalty.	7		
8. Total (Include Interest and Penalty if Due).	8		

Name
And
Address

Tax Year 2004

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 _____

THIS RETURN MUST BE FILED ON OR BEFORE JUNE 15, 2004

MAKE CHECK OR MONEY ORDER TO:

VILLAGE OF EVENDALE
10500 READING RD
EVENDALE OH 45241

Voice 513-563-2671 Fax 513-563-2244

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		
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5. Adjustments of Tax for Prior Period.	5		
6. Interest.	6		
7. Penalty.	7		
8. Total (Include Interest and Penalty if Due).	8		

Name
And
Address

Tax Year 2004

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 _____

THIS RETURN MUST BE FILED ON OR BEFORE JULY 15, 2004

MAKE CHECK OR MONEY ORDER TO:

VILLAGE OF EVENDALE
10500 READING RD
EVENDALE OH 45241

Voice 513-563-2671 Fax 513-563-2244

Period Ending JUNE

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		
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5. Adjustments of Tax for Prior Period.	5		
6. Interest.	6		
7. Penalty.	7		
8. Total (Include Interest and Penalty if Due).	8		

Name

And

Address

Tax Year 2004

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 _____

THIS RETURN MUST BE FILED ON OR BEFORE AUGUST 15, 2004

MAKE CHECK OR MONEY ORDER TO:

VILLAGE OF EVENDALE
10500 READING RD
EVENDALE OH 45241

Voice 513-563-2671 Fax 513-563-2244

Period Ending JULY

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		
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5. Adjustments of Tax for Prior Period.	5		
6. Interest.	6		
7. Penalty.	7		
8. Total (Include Interest and Penalty if Due).	8		

Name

And

Address

Tax Year 2004

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 _____

THIS RETURN MUST BE FILED ON OR BEFORE SEPTEMBER 15, 2004

MAKE CHECK OR MONEY ORDER TO:

VILLAGE OF EVENDALE
10500 READING RD
EVENDALE OH 45241

Voice 513-563-2671 Fax 513-563-2244

Period Ending AUGUST

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 0.900 %	4		
5. Adjustments of Tax for Prior Period.	5		
6. Interest.	6		
7. Penalty.	7		
8. Total (Include Interest and Penalty if Due).	8		

Name

And

Address

Tax Year 2004

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 _____

THIS RETURN MUST BE FILED ON OR BEFORE OCTOBER 15, 2004

MAKE CHECK OR MONEY ORDER TO:

VILLAGE OF EVENDALE
10500 READING RD
EVENDALE OH 45241

Voice 513-563-2671 Fax 513-563-2244

Period Ending SEPTEMBER

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		
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5. Adjustments of Tax for Prior Period.	5		
6. Interest.	6		
7. Penalty.	7		
8. Total (Include Interest and Penalty if Due).	8		

Name
And
Address

Tax Year 2004

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 _____

THIS RETURN MUST BE FILED ON OR BEFORE NOVEMBER 15, 2004

MAKE CHECK OR MONEY ORDER TO:

VILLAGE OF EVENDALE
10500 READING RD
EVENDALE OH 45241

Voice 513-563-2671 Fax 513-563-2244

Period Ending OCTOBER

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		
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6. Interest.	6		
7. Penalty.	7		
8. Total (Include Interest and Penalty if Due).	8		

Name
And
Address

Tax Year 2004

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 _____

THIS RETURN MUST BE FILED ON OR BEFORE DECEMBER 15, 2004

MAKE CHECK OR MONEY ORDER TO:

VILLAGE OF EVENDALE
10500 READING RD
EVENDALE OH 45241

Voice 513-563-2671 Fax 513-563-2244

Period Ending NOVEMBER

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		
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6. Interest.	6		
7. Penalty.	7		
8. Total (Include Interest and Penalty if Due).	8		

Name
And
Address

Tax Year 2004

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 _____

THIS RETURN MUST BE FILED ON OR BEFORE JANUARY 15, 2005

MAKE CHECK OR MONEY ORDER TO:

VILLAGE OF EVENDALE
10500 READING RD
EVENDALE OH 45241

Voice 513-563-2671 Fax 513-563-2244

Period Ending DECEMBER

TAX ID

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