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Number of Taxable Employees	.	1	Tax Year 2	017
Compensation paid all employees	2		I hereby certify that the information ar	
3 Less navroll not subject to tax			in and in any schedules or exhibits at	tached are true and correct.
	3		Signed	
4. Taxable Earnings (line 2 minus 3)	. 4		Title	Date
5. Actual Tax Withheld at 1.200 %			Phone #	
6. Adjustments of Tax for Prior Period	6		THIS RETURN MUST B	E FILED ON
7. Interest 6% per annum (.50% per month)	7		OR BEFORE FEBRUARY	15, 2017
B. Penalty 50% (1 time charge)	8		MAKE CHECK OR MC	NEY ORDER TO:
9. Total (Include Interest and Penalty if Due)	9		VILLAGE OF EV	
			10500 READ	
Name			EVENDALE OH	=
Hamo				
And			Voice 513-563-2671	Fax 513-563-4636
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Address			Daried Ending IANIIADY	
			Period Ending JANUARY	
		TA	X ID	
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FORM W1 12 EMPLOYE	R'S WITHHOLI			SHIP OR NAME AND ADDRESS.
	1 1	NOTIFY INCOME TAX DI	EPARTMENT PROMPTLY OF ANY CHANGE IN OWNERS	
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Number of Taxable Employees	. 1	NOTIFY INCOME TAX DI	EPARTMENT PROMPTLY OF ANY CHANGE IN OWNERS Tax Year 2 I hereby certify that the information ar	017 nd statements contained he
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Number of Taxable Employees. Total Salaries, Wages, Commissions and other Compensation paid all employees. Less payroll not subject to tax.	. 1	NOTIFY INCOME TAX DI	Tax Year 2 I hereby certify that the information ar in and in any schedules or exhibits at Signed	017 nd statements contained he tached are true and correct.
1. Number of Taxable Employees. 2. Total Salaries, Wages, Commissions and other Compensation paid all employees. 3. Less payroll not subject to tax. 4. Taxable Earnings (line 2 minus 3).	· 1 2 3 4	NOTIFY INCOME TAX DI	Tax Year 2 I hereby certify that the information ar in and in any schedules or exhibits at	017 nd statements contained he tached are true and correct.
1. Number of Taxable Employees. 2. Total Salaries, Wages, Commissions and other Compensation paid all employees. 3. Less payroll not subject to tax. 4. Taxable Earnings (line 2 minus 3). 5. Actual Tax Withheld at 1.200 %.	. 1 . 2 3 . 4	NOTIFY INCOME TAX DI	Tax Year 2 I hereby certify that the information ar in and in any schedules or exhibits at Signed	017 nd statements contained he tached are true and correct
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1. Number of Taxable Employees. 2. Total Salaries, Wages, Commissions and other Compensation paid all employees. 3. Less payroll not subject to tax. 4. Taxable Earnings (line 2 minus 3). 5. Actual Tax Withheld at 1.200 %. 6. Adjustments of Tax for Prior Period.	1 2 3 4 5 6 7 8	NOTIFY INCOME TAX DI	Tax Year 2 I hereby certify that the information arin and in any schedules or exhibits at Signed Title Phone # THIS RETURN MUST B	O17 nd statements contained he tached are true and correct Date BE FILED ON 5, 2017 DNEY ORDER TO:
1. Number of Taxable Employees. 2. Total Salaries, Wages, Commissions and other Compensation paid all employees. 3. Less payroll not subject to tax. 4. Taxable Earnings (line 2 minus 3). 5. Actual Tax Withheld at 1.200 %. 6. Adjustments of Tax for Prior Period. 7. Interest 6% per annum (.50% per month). 8. Penalty 50% (1 time charge).	1 2 3 4 5 6 7 8	NOTIFY INCOME TAX DI	Tax Year 2 I hereby certify that the information arin and in any schedules or exhibits at Signed Title Phone # THIS RETURN MUST BOR BEFORE MARCH 1 MAKE CHECK OR MC	O17 Indicate the statements contained he tached are true and correct to the statement of t
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1. Number of Taxable Employees. 2. Total Salaries, Wages, Commissions and other Compensation paid all employees. 3. Less payroll not subject to tax. 4. Taxable Earnings (line 2 minus 3). 5. Actual Tax Withheld at 1.200 %. 6. Adjustments of Tax for Prior Period. 7. Interest 6% per annum (.50% per month). 8. Penalty 50% (1 time charge). 9. Total (Include Interest and Penalty if Due).	1 2 3 4 5 6 7 8	NOTIFY INCOME TAX DI	Tax Year 2 I hereby certify that the information arin and in any schedules or exhibits at Signed Title Phone # THIS RETURN MUST BOR BEFORE MARCH 1 MAKE CHECK OR MC VILLAGE OF EY 10500 READ	Date BE FILED ON 5, 2017 DNEY ORDER TO: VENDALE ING RD

Period Ending FEBRUARY

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

TAX ID

Address

1. Number of Taxable Employees			
2. Total Salaries, Wages, Commissions and other Compensation paid all employees.	Tax Year 2017 I hereby certify that the information and statements contained her in and in any schedules or exhibits attached are true and correct.		
3. Less payroll not subject to tax	,		
	Signed		
4. Taxable Earnings (line 2 minus 3)	Title Date		
5. Actual Tax Withheld at 1.200 %	Phone #		
6. Adjustments of Tax for Prior Period	THIS RETURN MUST BE FILED ON		
7 Interest 6% per annum (50% per month) [7]	OR BEFORE APRIL 15, 2017		
8 Penalty 50% (1 time charge)	MAKE CHECK OR MONEY ORDER TO:		
9. Total (Include Interest and Penalty if Due)	VILLAGE OF EVENDALE		
Name	10500 READING RD EVENDALE OH 45241-2574		
And	Voice 513-563-2671 Fax 513-563-4636		
Address	Period Ending MARCH TAX ID		
	NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.		
FORM W1 12 EMPLOYER'S WITHHO	NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.		
Number of Taxable Employees. 1 2. Total Salaries, Wages, Commissions and other	NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS. PLDING - MONTHLY Tax Year 2017 I hereby certify that the information and statements contained her		
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1. Number of Taxable Employees	Tax Year 2017 I hereby certify that the information and statements contained her in and in any schedules or exhibits attached are true and correct. Signed Title Phone # THIS RETURN MUST BE FILED ON OR BEFORE MAY 15, 2017		
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1. Number of Taxable Employees	Tax Year 2017 I hereby certify that the information and statements contained her in and in any schedules or exhibits attached are true and correct. Signed Title Phone # THIS RETURN MUST BE FILED ON OR BEFORE MAY 15, 2017		
1. Number of Taxable Employees	Tax Year 2017 I hereby certify that the information and statements contained he in and in any schedules or exhibits attached are true and correct. Signed Title Phone # THIS RETURN MUST BE FILED ON OR BEFORE MAY 15, 2017 MAKE CHECK OR MONEY ORDER TO: VILLAGE OF EVENDALE 10500 READING RD		
1. Number of Taxable Employees	Tax Year 2017 I hereby certify that the information and statements contained he 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, 2017 MAKE CHECK OR MONEY ORDER TO: VILLAGE OF EVENDALE		
1. Number of Taxable Employees. 2. Total Salaries, Wages, Commissions and other Compensation paid all employees. 2 3. Less payroll not subject to tax. 3 4. Taxable Earnings (line 2 minus 3). 4 5. Actual Tax Withheld at 1.200 %. 5 6. Adjustments of Tax for Prior Period. 6 7. Interest 6% per annum (.50% per month). 7 8. Penalty. 50% (1 time charge). 8 9. Total (Include Interest and Penalty if Due). 9	Tax Year 2017 I hereby certify that the information and statements contained he in and in any schedules or exhibits attached are true and correct. Signed Title Phone # THIS RETURN MUST BE FILED ON OR BEFORE MAY 15, 2017 MAKE CHECK OR MONEY ORDER TO: VILLAGE OF EVENDALE 10500 READING RD		

Period Ending APRIL

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

TAX ID

1. Number of Taxable Employees	-
Total Salaries, Wages, Commissions and other Compensation paid all employees	Tax Year 2017 I hereby certify that the information and statements contained her in and in any schedules or exhibits attached are true and correct.
3. Less payroll not subject to tax	,
3	Signed
4. Taxable Earnings (line 2 minus 3)	Title Date
5. Actual Tax Withheld at 1.200 %	Phone #
6. Adjustments of Tax for Prior Period	THIS RETURN MUST BE FILED ON
7. Interest 6% per annum (.50% per month)	OR BEFORE JUNE 15, 2017
3. Penalty 50% (1 time charge)	MAKE CHECK OR MONEY ORDER TO:
O. Total (Include Interest and Penalty if Due)	VILLAGE OF EVENDALE
Name	10500 READING RD EVENDALE OH 45241-2574
Name	EVENDALE OIT 40241 2014
And	Voice 513-563-2671 Fax 513-563-4636
Address	Period Ending MAY
	TAX ID
	TAKE
	NOTICY INCOME TAY DEPARTMENT PROMPTLY OF ANY CHANCE IN OWNERSHIP OF NAME AND ADDRESS
	NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.
	NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.
FORM W/4 40	
FORM W1 12 EMPLOYER'S WITHHOL	
I. Number of Taxable Employees	DING - MONTHLY
Number of Taxable Employees	DING - MONTHLY Tax Year 2017
. Number of Taxable Employees	DING - MONTHLY Tax Year 2017 I hereby certify that the information and statements contained here
. Number of Taxable Employees	Tax Year 2017 I hereby certify that the information and statements contained her in and in any schedules or exhibits attached are true and correct.
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1. Number of Taxable Employees	Tax Year 2017 I hereby certify that the information and statements contained her in and in any schedules or exhibits attached are true and correct. Signed Title Date
1. Number of Taxable Employees	Tax Year 2017 I hereby certify that the information and statements contained her in and in any schedules or exhibits attached are true and correct. Signed Title Phone #
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1. Number of Taxable Employees	Tax Year 2017 I hereby certify that the information and statements contained her in and in any schedules or exhibits attached are true and correct. Signed Title Phone #
1. Number of Taxable Employees	Tax Year 2017 I hereby certify that the information and statements contained her in and in any schedules or exhibits attached are true and correct. Signed Title Phone # THIS RETURN MUST BE FILED ON
1. Number of Taxable Employees	Tax Year 2017 I hereby certify that the information and statements contained her 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, 2017
Number of Taxable Employees. 1	Tax Year 2017 I hereby certify that the information and statements contained her in and in any schedules or exhibits attached are true and correct. Signed Title Phone # THIS RETURN MUST BE FILED ON OR BEFORE JULY 15, 2017 MAKE CHECK OR MONEY ORDER TO:
. Number of Taxable Employees	Tax Year 2017 I hereby certify that the information and statements contained her in and in any schedules or exhibits attached are true and correct. Signed Title Phone # THIS RETURN MUST BE FILED ON OR BEFORE JULY 15, 2017 MAKE CHECK OR MONEY ORDER TO: VILLAGE OF EVENDALE
Number of Taxable Employees. Total Salaries, Wages, Commissions and other Compensation paid all employees. Less payroll not subject to tax. Taxable Earnings (line 2 minus 3). Actual Tax Withheld at 1.200 %. Adjustments of Tax for Prior Period. Interest. 6% per annum (.50% per month). Penalty. 50% (1 time charge). Total (Include Interest and Penalty if Due).	Tax Year 2017 I hereby certify that the information and statements contained her in and in any schedules or exhibits attached are true and correct. Signed Title Phone # THIS RETURN MUST BE FILED ON OR BEFORE JULY 15, 2017 MAKE CHECK OR MONEY ORDER TO: VILLAGE OF EVENDALE 10500 READING RD EVENDALE OH 45241-2574
Number of Taxable Employees. 2. Total Salaries, Wages, Commissions and other Compensation paid all employees. 3. Less payroll not subject to tax. 4. Taxable Earnings (line 2 minus 3). 4. Actual Tax Withheld at 1.200 %. 5. Adjustments of Tax for Prior Period. 7. Interest. 6. Penalty. 7. Separation of the charge of t	Tax Year 2017 I hereby certify that the information and statements contained her in and in any schedules or exhibits attached are true and correct. Signed Title Phone # THIS RETURN MUST BE FILED ON OR BEFORE JULY 15, 2017 MAKE CHECK OR MONEY ORDER TO: VILLAGE OF EVENDALE 10500 READING RD

Period Ending JUNE

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

TAX ID

1. Number of Taxable Employees	Tou Voor 0047		
2. Total Salaries, Wages, Commissions and other Compensation paid all employees	Tax Year 2017 I hereby certify that the information and statements contained he in and in any schedules or exhibits attached are true and correct.		
3. Less payroll not subject to tax	·		
3	Signed		
. Taxable Earnings (line 2 minus 3)	Title Date		
. Actual Tax Withheld at 1.200 %	Phone #		
Adjustments of Tax for Prior Period	THIS RETURN MUST BE FILED ON		
Interest 6% per annum (.50% per month)	OR BEFORE AUGUST 15, 2017		
Penalty 50% (1 time charge)	MAKE CHECK OR MONEY ORDER TO:		
Total (Include Interest and Penalty if Due)	VILLAGE OF EVENDALE		
	10500 READING RD		
Name	EVENDALE OH 45241-2574		
And	Voice 513-563-2671 Fax 513-563-463		
Address	Period Ending JULY TAX ID NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.		
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Number of Taxable Employees	DLDING - MONTHLY Tax Year 2017 I hereby certify that the information and statements contained he in and in any schedules or exhibits attached are true and correct		
Number of Taxable Employees	DLDING - MONTHLY Tax Year 2017 I hereby certify that the information and statements contained he in and in any schedules or exhibits attached are true and correct Signed		
Number of Taxable Employees	DLDING - MONTHLY Tax Year 2017 I hereby certify that the information and statements contained he in and in any schedules or exhibits attached are true and correct Signed Title Date		
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1. Number of Taxable Employees	Tax Year 2017 I hereby certify that the information and statements contained in and in any schedules or exhibits attached are true and correspond Title Date Phone # THIS RETURN MUST BE FILED ON OR BEFORE SEPTEMBER 15, 2017 MAKE CHECK OR MONEY ORDER TO VILLAGE OF EVENDALE 10500 READING RD		

TAX ID

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

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Number of Taxable Employees. Total Salaries, Wages, Commissions and other	1		Tax Year	2017
Compensation paid all employees	2		I hereby certify that the information	
3. Less payroll not subject to tax			in and in any schedules or exhibits	
	3		Signed	
4. Taxable Earnings (line 2 minus 3)	4		Title	Date
5. Actual Tax Withheld at 1.200 %	5		Phone #	
6. Adjustments of Tax for Prior Period	6		THIS RETURN MUST	BE FILED ON
7. Interest 6% per annum (.50% per month)	7		OR BEFORE OCTOBER	15, 2017
8. Penalty 50% (1 time charge)	8		MAKE CHECK OR M	
9. Total (Include Interest and Penalty if Due)	9		VILLAGE OF	
	•	·	10500 REA	
Name			EVENDALE OF	_
Name				02 20
And			Voice 512 562 2671	Foy F12 F62 4620
7 11 10			Voice 513-563-2671	Fax 513-563-4636
Addross				
Address			Period Ending SEPTEMB	ER
		TA	X ID	
			X ID	ERSHIP OR NAME AND ADDRESS
			X ID EPARTMENT PROMPTLY OF ANY CHANGE IN OWN	ERSHIP OR NAME AND ADDRESS.
				ERSHIP OR NAME AND ADDRESS.
FORM W1 12 EMPLOYER'	S WITHHOLD	NOTIFY INCOME TAX DE		ERSHIP OR NAME AND ADDRESS.
	1 1			ERSHIP OR NAME AND ADDRESS.
1. Number of Taxable Employees	1 1	NOTIFY INCOME TAX DE		
Number of Taxable Employees	1	NOTIFY INCOME TAX DE	EPARTMENT PROMPTLY OF ANY CHANGE IN OWN Tax Year I hereby certify that the information	2017 and statements contained he
Number of Taxable Employees	1 2	NOTIFY INCOME TAX DE	EPARTMENT PROMPTLY OF ANY CHANGE IN OWN	2017 and statements contained he
Number of Taxable Employees	1 2	NOTIFY INCOME TAX DE	EPARTMENT PROMPTLY OF ANY CHANGE IN OWN Tax Year I hereby certify that the information	2017 and statements contained he attached are true and correct.
Number of Taxable Employees. Total Salaries, Wages, Commissions and other Compensation paid all employees. Less payroll not subject to tax.	2 3	NOTIFY INCOME TAX DE	Tax Year I hereby certify that the information in and in any schedules or exhibits Signed	2017 and statements contained he attached are true and correct.
1. Number of Taxable Employees. 2. Total Salaries, Wages, Commissions and other Compensation paid all employees. 3. Less payroll not subject to tax. 4. Taxable Earnings (line 2 minus 3).	2 3 4	NOTIFY INCOME TAX DE	Tax Year I hereby certify that the information in and in any schedules or exhibits Signed Title	2017 and statements contained he attached are true and correct.
1. Number of Taxable Employees. 2. Total Salaries, Wages, Commissions and other Compensation paid all employees. 3. Less payroll not subject to tax. 4. Taxable Earnings (line 2 minus 3). 5. Actual Tax Withheld at 1.200 %.	1 2 3 4 5 5	NOTIFY INCOME TAX DE	Tax Year I hereby certify that the information in and in any schedules or exhibits Signed Title Phone #	2017 and statements contained he attached are true and correct Date
1. Number of Taxable Employees. 2. Total Salaries, Wages, Commissions and other Compensation paid all employees. 3. Less payroll not subject to tax. 4. Taxable Earnings (line 2 minus 3). 5. Actual Tax Withheld at 1.200 %. 6. Adjustments of Tax for Prior Period.	1 2 3 4 5 6	NOTIFY INCOME TAX DE	Tax Year I hereby certify that the information in and in any schedules or exhibits Signed Title Phone # THIS RETURN MUST	2017 and statements contained he attached are true and correct. Date BE FILED ON
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1. Number of Taxable Employees. 2. Total Salaries, Wages, Commissions and other Compensation paid all employees. 3. Less payroll not subject to tax. 4. Taxable Earnings (line 2 minus 3). 5. Actual Tax Withheld at 1.200 %. 6. Adjustments of Tax for Prior Period. 7. Interest 6% per annum (.50% per month). 8. Penalty 50% (1 time charge).	1 2 3 4 5 6 7 8	NOTIFY INCOME TAX DE	Tax Year I hereby certify that the information in and in any schedules or exhibits Signed Title Phone # THIS RETURN MUST OR BEFORE NOVEMBE	2017 and statements contained he attached are true and correct Date BE FILED ON ER 15, 2017 MONEY ORDER TO:
1. Number of Taxable Employees. 2. Total Salaries, Wages, Commissions and other Compensation paid all employees. 3. Less payroll not subject to tax. 4. Taxable Earnings (line 2 minus 3). 5. Actual Tax Withheld at 1.200 %. 6. Adjustments of Tax for Prior Period. 7. Interest 6% per annum (.50% per month).	1 2 3 4 5 6 7 8	NOTIFY INCOME TAX DE	Tax Year I hereby certify that the information in and in any schedules or exhibits Signed Title Phone # THIS RETURN MUST OR BEFORE NOVEMBE MAKE CHECK OR M VILLAGE OF	2017 and statements contained he attached are true and correct Date BE FILED ON ER 15, 2017 MONEY ORDER TO: EVENDALE
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Period Ending OCTOBER

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

TAX ID

Address

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Number of Taxable Employees	1	1	Tax Year	2017
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9. Total (Include Interest and Penalty if Due)	. 9		VILLAGE OF E	
			10500 REAL	
Name			EVENDALE OH	_
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And			Voice 513-563-2671	Fax 513-563-4636
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Period Ending DECEMBER

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TAX ID

Address