FORM W1 1114 EMPLOYER'S WITHHOLDING - QUARTERLY 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 1.750 %. 4 5. Adjustments of Tax for Prior Period. 5 6. 0.583% per month. 6 7. 50%. 7 8. Total (Include Interest and Penalty if Due). 8

Name

And

Address

Tax Year 2019 I hereby certify that the information and statements contained here in and in any schedules or exhibits attached are true and correct.							
S	Signed						
Title						Date	
Phone #							
	THIS	RETU	RN MU	JST BI	Ξ :	FILED	ON
	OR B	EFORE	APRI	т 30	,	2019	
l	MAKE CHECK OR MONEY ORDER TO:						
J	VILLAGE OF FAIRFAX TAX DEPARTMENT						
	5903 HAWTHORNE AVE						
		FAIRE	AX (CIN	NTI.) OH	1 4	45227-36	97

Fax 513-561-5748

Period Ending JAN-FEB-MAR

Voice 513-527-6506 Ext

TAX ID

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

FORM W1 1114 EMPLO	YER'S WITHHOLDING	- QUARTERLY
1. Number of Taxable Employees	1	T V 0040
2. Total Salaries, Wages, Commissions and other		Tax Year 2019 I hereby certify that the information and statements contained h
Compensation paid all employees		in and in any schedules or exhibits attached are true and corre
		Signed
2. Tayahla Farninga (from line 2)		
3. Taxable Earnings (from line 2)		Title Date
4. Actual Tax Withheld at 1.750 %		Phone #
5. Adjustments of Tax for Prior Period		THIS RETURN MUST BE FILED ON
6. 0.583% per month		OR BEFORE JULY 31, 2019
7. 50%	8	MAKE CHECK OR MONEY ORDER TO
8. Total (include interest and Ferialty ii Due)	······	VILLAGE OF FAIRFAX TAX DEPARTMENT
		5903 HAWTHORNE AVE
Name		FAIRFAX (CINTI.) OH 45227-3697
A . I		
And		Voice 513-527-6506 Ext Fax 513-561-574
Address		Period Ending APR-MAY-JUN
		TAX ID
		NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.
FORM WA 4444 EMPLO	VEDIC WITHIOLDING	OHARTERLY
	OYER'S WITHHOLDING	- QUARTERLY
1. Number of Taxable Employees	1	Tax Year 2019
2. Total Salaries, Wages, Commissions and other		I hereby certify that the information and statements contained h
Compensation paid all employees		in and in any schedules or exhibits attached are true and correct
		Signed
3. Taxable Earnings (from line 2)	3	Title Date
4. Actual Tax Withheld at 1.750 %		Phone #
5. Adjustments of Tax for Prior Period		THIS RETURN MUST BE FILED ON
6. 0.583% per month		OR BEFORE OCTOBER 31, 2019
7. 50%	7	MAKE CHECK OR MONEY ORDER TO
8. Total (Include Interest and Penalty if Due)	8	
		VILLAGE OF FAIRFAX TAX DEPARTMENT
Name		5903 HAWTHORNE AVE FAIRFAX (CINTI.) OH 45227-3697
Name		17/11/17/2 (OHV11.) OIT 45227 5007
And		Voice 513-527-6506 Ext Fax 513-561-574
2		Voice 515-521-0500 Ext
Address		Deviced Fundings IIII ALIC CED
Addiess		Period Ending JUL-AUG-SEP
		TAX ID
		NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.
FORM W1 1114 EMPLO	YER'S WITHHOLDING	- QUARTERLY
1. Number of Taxable Employees	11	
Total Salaries, Wages, Commissions and other	· · · · · · · · · · · · · · · · · · ·	Tax Year 2019
Compensation paid all employees	2	I hereby certify that the information and statements contained hereby in and in any schedules or exhibits attached are true and corre
		-
		Signed
3. Taxable Earnings (from line 2)		Title Date
4. Actual Tax Withheld at 1.750 %		Phone #
5. Adjustments of Tax for Prior Period	5	THIS RETURN MUST BE FILED ON
6. 0.583% per month	6	OR BEFORE JANUARY 31, 2020
7. 50%		MAKE CHECK OR MONEY ORDER TO
8. Total (Include Interest and Penalty if Due)	8	VILLAGE OF FAIRFAX TAX DEPARTMENT
		5903 HAWTHORNE AVE
Name		FAIRFAX (CINTI.) OH 45227-3697
And		Voice 513-527-6506 Ext Fax 513-561-574

Address

Period Ending OCT-NOV-DEC

TAX ID