

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. 0.50% per month.	6	
7. 50%.	7	
8. Total (Include Interest and Penalty if Due).	8	

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:
VILLAGE OF FAIRFAX TAX DEPARTMENT
5903 HAWTHORNE AVE
FAIRFAX (CINTL.) OH 45227-3697

Voice 513-527-6506 Fax 513-561-5748

Name

And

Address

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 1.750 %.	4	
5. Adjustments of Tax for Prior Period.	5	
6. 0.50% per month.	6	
7. 50%.	7	
8. Total (Include Interest and Penalty if Due).	8	

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:
VILLAGE OF FAIRFAX TAX DEPARTMENT
5903 HAWTHORNE AVE
FAIRFAX (CINTL.) OH 45227-3697

Voice 513-527-6506 Fax 513-561-5748

Name

And

Address

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 1.750 %.	4	
5. Adjustments of Tax for Prior Period.	5	
6. 0.50% per month.	6	
7. 50%.	7	
8. Total (Include Interest and Penalty if Due).	8	

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:
VILLAGE OF FAIRFAX TAX DEPARTMENT
5903 HAWTHORNE AVE
FAIRFAX (CINTL.) OH 45227-3697

Voice 513-527-6506 Fax 513-561-5748

Name

And

Address

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 1.750 %.	4	
5. Adjustments of Tax for Prior Period.	5	
6. 0.50% per month.	6	
7. 50%.	7	
8. Total (Include Interest and Penalty if Due).	8	

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 MAY 15, 2018

MAKE CHECK OR MONEY ORDER TO:
 VILLAGE OF FAIRFAX TAX DEPARTMENT
 5903 HAWTHORNE AVE
 FAIRFAX (CINTL.) OH 45227-3697

Voice 513-527-6506 Fax 513-561-5748

Name

And

Address

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 1.750 %.	4	
5. Adjustments of Tax for Prior Period.	5	
6. 0.50% per month.	6	
7. 50%.	7	
8. Total (Include Interest and Penalty if Due).	8	

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 JUNE 15, 2018

MAKE CHECK OR MONEY ORDER TO:
 VILLAGE OF FAIRFAX TAX DEPARTMENT
 5903 HAWTHORNE AVE
 FAIRFAX (CINTL.) OH 45227-3697

Voice 513-527-6506 Fax 513-561-5748

Name

And

Address

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	
4. Actual Tax Withheld at 1.750 %.	4	
5. Adjustments of Tax for Prior Period.	5	
6. 0.50% per month.	6	
7. 50%.	7	
8. Total (Include Interest and Penalty if Due).	8	

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 JULY 15, 2018

MAKE CHECK OR MONEY ORDER TO:
 VILLAGE OF FAIRFAX TAX DEPARTMENT
 5903 HAWTHORNE AVE
 FAIRFAX (CINTL.) OH 45227-3697

Voice 513-527-6506 Fax 513-561-5748

Name

And

Address

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	
4. Actual Tax Withheld at 1.750 %.	4	
5. Adjustments of Tax for Prior Period.	5	
6. 0.50% per month.	6	
7. 50%.	7	
8. Total (Include Interest and Penalty if Due).	8	

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 AUGUST 15, 2018

MAKE CHECK OR MONEY ORDER TO:
 VILLAGE OF FAIRFAX TAX DEPARTMENT
 5903 HAWTHORNE AVE
 FAIRFAX (CINTL.) OH 45227-3697

Voice 513-527-6506 Fax 513-561-5748

Name
And
Address

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	
4. Actual Tax Withheld at 1.750 %.	4	
5. Adjustments of Tax for Prior Period.	5	
6. 0.50% per month.	6	
7. 50%.	7	
8. Total (Include Interest and Penalty if Due).	8	

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 SEPTEMBER 15, 2018

MAKE CHECK OR MONEY ORDER TO:
 VILLAGE OF FAIRFAX TAX DEPARTMENT
 5903 HAWTHORNE AVE
 FAIRFAX (CINTL.) OH 45227-3697

Voice 513-527-6506 Fax 513-561-5748

Name
And
Address

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 1.750 %.	4	
5. Adjustments of Tax for Prior Period.	5	
6. 0.50% per month.	6	
7. 50%.	7	
8. Total (Include Interest and Penalty if Due).	8	

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 OCTOBER 15, 2018

MAKE CHECK OR MONEY ORDER TO:
 VILLAGE OF FAIRFAX TAX DEPARTMENT
 5903 HAWTHORNE AVE
 FAIRFAX (CINTL.) OH 45227-3697

Voice 513-527-6506 Fax 513-561-5748

Name
And
Address

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	
4. Actual Tax Withheld at 1.750 %.	4	
5. Adjustments of Tax for Prior Period.	5	
6. 0.50% per month.	6	
7. 50%.	7	
8. Total (Include Interest and Penalty if Due).	8	

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 NOVEMBER 15, 2018**

MAKE CHECK OR MONEY ORDER TO:
VILLAGE OF FAIRFAX TAX DEPARTMENT
5903 HAWTHORNE AVE
FAIRFAX (CINTL.) OH 45227-3697

Voice 513-527-6506 Fax 513-561-5748

Name

And

Address

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	
3. Taxable Earnings (from line 2).	3	
4. Actual Tax Withheld at 1.750 %.	4	
5. Adjustments of Tax for Prior Period.	5	
6. 0.50% per month.	6	
7. 50%.	7	
8. Total (Include Interest and Penalty if Due).	8	

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 DECEMBER 15, 2018**

MAKE CHECK OR MONEY ORDER TO:
VILLAGE OF FAIRFAX TAX DEPARTMENT
5903 HAWTHORNE AVE
FAIRFAX (CINTL.) OH 45227-3697

Voice 513-527-6506 Fax 513-561-5748

Name

And

Address

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. 0.50% per month.	6	
7. 50%.	7	
8. Total (Include Interest and Penalty if Due).	8	

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 JANUARY 15, 2019**

MAKE CHECK OR MONEY ORDER TO:
VILLAGE OF FAIRFAX TAX DEPARTMENT
5903 HAWTHORNE AVE
FAIRFAX (CINTL.) OH 45227-3697

Voice 513-527-6506 Fax 513-561-5748

Name

And

Address

Period Ending DECEMBER

TAX ID

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