

FORM W1 11

EMPLOYER'S WITHHOLDING - QUARTERLY

Table with 8 rows and 3 columns for tax reporting. Row 1: Number of Taxable Employees. Row 2: Total Salaries, Wages, Commissions and other Compensation paid all employees. Row 3: Taxable Earnings (from line 2). Row 4: Actual Tax Withheld at 1.000 %. Row 5: Adjustments of Tax for Prior Period. Row 6: .50% per month. Row 7: 50%. Row 8: Total (Include Interest and Penalty if Due).

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 30, 2018

MAKE CHECK OR MONEY ORDER TO:

THE VILLAGE OF SOUTH AMHERST
INCOME TAX DEPT
103 W. MAIN STREET
SOUTH AMHERST OH 44001

Voice 440-988-2877 Fax 440-988-3535

Name

And

Address

Period Ending JAN-FEB-MAR

TAX ID

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

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EMPLOYER'S WITHHOLDING - QUARTERLY

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Tax Year 2018

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Signed \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_

Phone # \_\_\_\_\_

THIS RETURN MUST BE FILED ON OR BEFORE JULY 31, 2018

MAKE CHECK OR MONEY ORDER TO:

THE VILLAGE OF SOUTH AMHERST
INCOME TAX DEPT
103 W. MAIN STREET
SOUTH AMHERST OH 44001

Voice 440-988-2877 Fax 440-988-3535

Name

And

Address

Period Ending APR-MAY-JUN

TAX ID

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

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Tax Year 2018

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Signed \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_

Phone # \_\_\_\_\_

THIS RETURN MUST BE FILED ON OR BEFORE OCTOBER 31, 2018

MAKE CHECK OR MONEY ORDER TO:

THE VILLAGE OF SOUTH AMHERST
INCOME TAX DEPT
103 W. MAIN STREET
SOUTH AMHERST OH 44001

Voice 440-988-2877 Fax 440-988-3535

Name

And

Address

Period Ending JUL-AUG-SEP

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 1.000 %. ....	4		
5. Adjustments of Tax for Prior Period. ....	5		
6. .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 31, 2019**

**MAKE CHECK OR MONEY ORDER TO:**  
 THE VILLAGE OF SOUTH AMHERST  
 INCOME TAX DEPT  
 103 W. MAIN STREET  
 SOUTH AMHERST OH 44001  
 Voice 440-988-2877 Fax 440-988-3535

Name

And

Address

Period Ending OCT-NOV-DEC

TAX ID

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