

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 1.500 %.	4		
5. Adjustments of Tax for Prior Period.	5		
6. Total (Include Interest and Penalty if Due).	6		

Tax Year 2015

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 28, 2015**

MAKE CHECK OR MONEY ORDER TO:

VILLAGE OF NEW CONCORD

2 West Main Street

P.O. Box 10

New Concord OH 43762

Voice 740-826-7671

Fax 740-826-7617

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 1.500 %.	4		
5. Adjustments of Tax for Prior Period.	5		
6. Total (Include Interest and Penalty if Due).	6		

Name
And
Address

Tax Year 2015
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 31, 2015
MAKE CHECK OR MONEY ORDER TO:
VILLAGE OF NEW CONCORD
2 West Main Street
P.O. Box 10
New Concord OH 43762
Voice 740-826-7671 Fax 740-826-7617

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 1.500 %.	4		
5. Adjustments of Tax for Prior Period.	5		
6. Total (Include Interest and Penalty if Due).	6		

Name
And
Address

Tax Year 2015
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, 2015
MAKE CHECK OR MONEY ORDER TO:
VILLAGE OF NEW CONCORD
2 West Main Street
P.O. Box 10
New Concord OH 43762
Voice 740-826-7671 Fax 740-826-7617

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 1.500 %.	4		
5. Adjustments of Tax for Prior Period.	5		
6. Total (Include Interest and Penalty if Due).	6		

Name
And
Address

Tax Year 2015
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 30, 2015
MAKE CHECK OR MONEY ORDER TO:
VILLAGE OF NEW CONCORD
2 West Main Street
P.O. Box 10
New Concord OH 43762
Voice 740-826-7671 Fax 740-826-7617

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 1.500 %.	4	
5. Adjustments of Tax for Prior Period.	5	
6. Total (Include Interest and Penalty if Due).	6	

Name
And
Address

Tax Year 2015

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 30, 2015**

MAKE CHECK OR MONEY ORDER TO:
VILLAGE OF NEW CONCORD
2 West Main Street
P.O. Box 10
New Concord OH 43762
Voice 740-826-7671 Fax 740-826-7617

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 1.500 %.	4	
5. Adjustments of Tax for Prior Period.	5	
6. Total (Include Interest and Penalty if Due).	6	

Name
And
Address

Tax Year 2015

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 30, 2015**

MAKE CHECK OR MONEY ORDER TO:
VILLAGE OF NEW CONCORD
2 West Main Street
P.O. Box 10
New Concord OH 43762
Voice 740-826-7671 Fax 740-826-7617

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 1.500 %.	4	
5. Adjustments of Tax for Prior Period.	5	
6. Total (Include Interest and Penalty if Due).	6	

Name
And
Address

Tax Year 2015

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 31, 2015**

MAKE CHECK OR MONEY ORDER TO:
VILLAGE OF NEW CONCORD
2 West Main Street
P.O. Box 10
New Concord OH 43762
Voice 740-826-7671 Fax 740-826-7617

Period Ending JULY

TAX ID

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

FORM W1 1335

EMPLOYER'S WITHHOLDING - MONTHLY

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 1.500 %.	4	
5. Adjustments of Tax for Prior Period.	5	
6. Total (Include Interest and Penalty if Due).	6	

Name
And
Address

Tax Year 2015

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 30, 2015**

MAKE CHECK OR MONEY ORDER TO:
VILLAGE OF NEW CONCORD
2 West Main Street
P.O. Box 10
New Concord OH 43762
Voice 740-826-7671 Fax 740-826-7617

Period Ending AUGUST

TAX ID

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

FORM W1 1335

EMPLOYER'S WITHHOLDING - MONTHLY

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 1.500 %.	4	
5. Adjustments of Tax for Prior Period.	5	
6. Total (Include Interest and Penalty if Due).	6	

Name
And
Address

Tax Year 2015

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 31, 2015**

MAKE CHECK OR MONEY ORDER TO:
VILLAGE OF NEW CONCORD
2 West Main Street
P.O. Box 10
New Concord OH 43762
Voice 740-826-7671 Fax 740-826-7617

Period Ending SEPTEMBER

TAX ID

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

FORM W1 1335

EMPLOYER'S WITHHOLDING - MONTHLY

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 1.500 %.	4	
5. Adjustments of Tax for Prior Period.	5	
6. Total (Include Interest and Penalty if Due).	6	

Name
And
Address

Tax Year 2015

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 30, 2015**

MAKE CHECK OR MONEY ORDER TO:
VILLAGE OF NEW CONCORD
2 West Main Street
P.O. Box 10
New Concord OH 43762
Voice 740-826-7671 Fax 740-826-7617

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 1.500 %	4		
5. Adjustments of Tax for Prior Period.	5		
6. Total (Include Interest and Penalty if Due).	6		

Name
 And
 Address

Tax Year 2015
 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 31, 2015**
MAKE CHECK OR MONEY ORDER TO:
 VILLAGE OF NEW CONCORD
 2 West Main Street
 P.O. Box 10
 New Concord OH 43762
 Voice 740-826-7671 Fax 740-826-7617

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		
4. Actual Tax Withheld at 1.500 %	4		
5. Adjustments of Tax for Prior Period.	5		
6. Total (Include Interest and Penalty if Due).	6		

Name
 And
 Address

Tax Year 2015
 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, 2016**
MAKE CHECK OR MONEY ORDER TO:
 VILLAGE OF NEW CONCORD
 2 West Main Street
 P.O. Box 10
 New Concord OH 43762
 Voice 740-826-7671 Fax 740-826-7617

Period Ending DECEMBER

TAX ID

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