

1	Number of Taxable Employees	1	
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3	Taxable Earnings (from line 2)	3	
4	Actual Tax Withheld at 1 950 %	4	
5	Adjustments of Tax for Prior Period	5	
6	Interest 0 833	6	
7	Penalty 50%	7	
8	Total (Include Interest and Penalty if Due)	8	

Name

And

Address

Tax Year 2024
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 18, 2024
MAKE CHECK OR MONEY ORDER TO:
JEFFERSON TWP-WASHINGTON CH JEDD
% CITY OF WASHINGTON
117 N MAIN ST
WASHINGTON CH OH 43160
Voice 740-636-2342 Ext Fax 740-636-2348

Period Ending JAN 15

TAX ID

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

FORM W1 1108

EMPLOYER'S WITHHOLDING - SEMI-MONTHLY

- 1 Number of Taxable Employees
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Tax Year 2024

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Title _____ Date _____

Phone # _____

**THIS RETURN MUST BE FILED ON
OR BEFORE FEBRUARY 3, 2024**

MAKE CHECK OR MONEY ORDER TO:

JEFFERSON TWP-WASHIINGTON CH JEDD
% CITY OF WASHINGTON
117 N MAIN ST
WASHINGTON CH OH 43160

Voice 740-636-2342 Ext Fax 740-636-2348

Period Ending JAN 31

TAX ID

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

FORM W1 1108

EMPLOYER'S WITHHOLDING - SEMI-MONTHLY

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OR BEFORE FEBRUARY 18, 2024**

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JEFFERSON TWP-WASHINGTON CH JEDD
% CITY OF WASHINGTON
117 N MAIN ST
WASHINGTON CH OH 43160

Voice 740-636-2342 Ext Fax 740-636-2348

Period Ending FEB 15

TAX ID

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

FORM W1 1108

EMPLOYER'S WITHHOLDING - SEMI-MONTHLY

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Tax Year 2024

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Title _____ Date _____

Phone # _____

**THIS RETURN MUST BE FILED ON
OR BEFORE MARCH 3, 2024**

MAKE CHECK OR MONEY ORDER TO:

JEFFERSON TWP-WASHIINGTON CH JEDD
% CITY OF WASHINGTON
117 N MAIN ST
WASHINGTON CH OH 43160

Voice 740-636-2342 Ext Fax 740-636-2348

Period Ending FEB 28

TAX ID

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

FORM W1 1108

EMPLOYER'S WITHHOLDING - SEMI-MONTHLY

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Phone # _____

THIS RETURN MUST BE FILED ON
OR BEFORE MARCH 18, 2024

MAKE CHECK OR MONEY ORDER TO:

JEFFERSON TWP-WASHINGTON CH JEDD
% CITY OF WASHINGTON
117 N MAIN ST
WASHINGTON CH OH 43160

Voice 740-636-2342 Ext Fax 740-636-2348

Name

And

Address

Period Ending MAR 15

TAX ID

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

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Tax Year 2024

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Title _____ Date _____

Phone # _____

THIS RETURN MUST BE FILED ON
OR BEFORE APRIL 3, 2024

MAKE CHECK OR MONEY ORDER TO:

JEFFERSON TWP-WASHINGTON CH JEDD
% CITY OF WASHINGTON
117 N MAIN ST
WASHINGTON CH OH 43160

Voice 740-636-2342 Ext Fax 740-636-2348

Name

And

Address

Period Ending MAR 31

TAX ID

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

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Phone # _____

THIS RETURN MUST BE FILED ON
OR BEFORE APRIL 18, 2024

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JEFFERSON TWP-WASHINGTON CH JEDD
% CITY OF WASHINGTON
117 N MAIN ST
WASHINGTON CH OH 43160

Voice 740-636-2342 Ext Fax 740-636-2348

Name

And

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Period Ending APR 15

TAX ID

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Tax Year 2024

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Title _____ Date _____

Phone # _____

**THIS RETURN MUST BE FILED ON
OR BEFORE MAY 3, 2024**

MAKE CHECK OR MONEY ORDER TO:

JEFFERSON TWP-WASHIINGTON CH JEDD

% CITY OF WASHINGTON

117 N MAIN ST

WASHINGTON CH OH 43160

Voice 740-636-2342 Ext Fax 740-636-2348

Period Ending APR 30

TAX ID

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

FORM W1 1108

EMPLOYER'S WITHHOLDING - SEMI-MONTHLY

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Tax Year 2024

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Title _____ Date _____

Phone # _____

**THIS RETURN MUST BE FILED ON
OR BEFORE MAY 18, 2024**

MAKE CHECK OR MONEY ORDER TO:

JEFFERSON TWP-WASHINGTON CH JEDD

% CITY OF WASHINGTON

117 N MAIN ST

WASHINGTON CH OH 43160

Voice 740-636-2342 Ext Fax 740-636-2348

Period Ending MAY 15

TAX ID

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Tax Year 2024

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Title _____ Date _____

Phone # _____

**THIS RETURN MUST BE FILED ON
OR BEFORE JUNE 3, 2024**

MAKE CHECK OR MONEY ORDER TO:

JEFFERSON TWP-WASHINGTON CH JEDD

% CITY OF WASHINGTON

117 N MAIN ST

WASHINGTON CH OH 43160

Voice 740-636-2342 Ext Fax 740-636-2348

Period Ending MAY 31

TAX ID

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

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Tax Year 2024

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Phone # _____

**THIS RETURN MUST BE FILED ON
OR BEFORE JUNE 18, 2024**

MAKE CHECK OR MONEY ORDER TO

JEFFERSON TWP-WASHINGTON CH JEDD
% CITY OF WASHINGTON
117 N MAIN ST
WASHINGTON CH OH 43160

Voice 740-636-2342 Ext Fax 740-636-2348

Name

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Period Ending JUN 15

TAX ID

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Tax Year 2024

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 3, 2024**

MAKE CHECK OR MONEY ORDER TO

JEFFERSON TWP-WASHINGTON CH JEDD
% CITY OF WASHINGTON
117 N MAIN ST
WASHINGTON CH OH 43160

Voice 740-636-2342 Ext Fax 740-636-2348

Name

And

Address

Period Ending JUN 30

TAX ID

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

FORM W1 1108

EMPLOYER'S WITHHOLDING - SEMI-MONTHLY

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Tax Year 2024

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Phone # _____

**THIS RETURN MUST BE FILED ON
OR BEFORE JULY 18, 2024**

MAKE CHECK OR MONEY ORDER TO

JEFFERSON TWP-WASHINGTON CH JEDD
% CITY OF WASHINGTON
117 N MAIN ST
WASHINGTON CH OH 43160

Voice 740-636-2342 Ext Fax 740-636-2348

Name

And

Address

Period Ending JUL 15

TAX ID

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

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Tax Year 2024

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Signed _____

Title _____ Date _____

Phone # _____

**THIS RETURN MUST BE FILED ON
OR BEFORE AUGUST 3, 2024**

MAKE CHECK OR MONEY ORDER TO:

JEFFERSON TWP-WASHIINGTON CH JEDD
% CITY OF WASHINGTON
117 N MAIN ST
WASHINGTON CH OH 43160

Voice 740-636-2342 Ext Fax 740-636-2348

Period Ending JUL 31

TAX ID

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

FORM W1 1108

EMPLOYER'S WITHHOLDING - SEMI-MONTHLY

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Title _____ Date _____

Phone # _____

**THIS RETURN MUST BE FILED ON
OR BEFORE AUGUST 18, 2024**

MAKE CHECK OR MONEY ORDER TO:

JEFFERSON TWP-WASHIINGTON CH JEDD
% CITY OF WASHINGTON
117 N MAIN ST
WASHINGTON CH OH 43160

Voice 740-636-2342 Ext Fax 740-636-2348

Period Ending AUG 15

TAX ID

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

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EMPLOYER'S WITHHOLDING - SEMI-MONTHLY

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Tax Year 2024

I hereby certify that the information and statements contained here in and in any schedules or exhibits attached are true and correct

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Title _____ Date _____

Phone # _____

**THIS RETURN MUST BE FILED ON
OR BEFORE SEPTEMBER 3, 2024**

MAKE CHECK OR MONEY ORDER TO:

JEFFERSON TWP-WASHINGTON CH JEDD
% CITY OF WASHINGTON
117 N MAIN ST
WASHINGTON CH OH 43160

Voice 740-636-2342 Ext Fax 740-636-2348

Period Ending AUG 31

TAX ID

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EMPLOYER'S WITHHOLDING - SEMI-MONTHLY

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Tax Year 2024

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Title _____ Date _____

Phone # _____

**THIS RETURN MUST BE FILED ON
OR BEFORE SEPTEMBER 18, 2024**

MAKE CHECK OR MONEY ORDER TO:
JEFFERSON TWP-WASHINGTON CH JEDD
% CITY OF WASHINGTON
117 N MAIN ST
WASHINGTON CH OH 43160
Voice 740-636-2342 Ext Fax 740-636-2348

Period Ending SEP 15

TAX ID

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FORM W1 1108

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Tax Year 2024

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Title _____ Date _____

Phone # _____

**THIS RETURN MUST BE FILED ON
OR BEFORE OCTOBER 3, 2024**

MAKE CHECK OR MONEY ORDER TO:
JEFFERSON TWP-WASHINGTON CH JEDD
% CITY OF WASHINGTON
117 N MAIN ST
WASHINGTON CH OH 43160
Voice 740-636-2342 Ext Fax 740-636-2348

Period Ending SEP 30

TAX ID

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

FORM W1 1108

EMPLOYER'S WITHHOLDING - SEMI-MONTHLY

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Title _____ Date _____

Phone # _____

**THIS RETURN MUST BE FILED ON
OR BEFORE OCTOBER 18, 2024**

MAKE CHECK OR MONEY ORDER TO:
JEFFERSON TWP-WASHINGTON CH JEDD
% CITY OF WASHINGTON
117 N MAIN ST
WASHINGTON CH OH 43160
Voice 740-636-2342 Ext Fax 740-636-2348

Period Ending OCT 15

TAX ID

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

FORM W1 1108

EMPLOYER'S WITHHOLDING - SEMI-MONTHLY

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Name

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Address

Tax Year 2024

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Signed _____

Title _____ Date _____

Phone # _____

**THIS RETURN MUST BE FILED ON
OR BEFORE NOVEMBER 3, 2024**

MAKE CHECK OR MONEY ORDER TO:

JEFFERSON TWP-WASHINGTON CH JEDD

% CITY OF WASHINGTON

117 N MAIN ST

WASHINGTON CH OH 43160

Voice 740-636-2342 Ext

Fax 740-636-2348

Period Ending OCT 31

TAX ID

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

FORM W1 1108

EMPLOYER'S WITHHOLDING - SEMI-MONTHLY

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MAKE CHECK OR MONEY ORDER TO:

JEFFERSON TWP-WASHINGTON CH JEDD

% CITY OF WASHINGTON

117 N MAIN ST

WASHINGTON CH OH 43160

Voice 740-636-2342 Ext

Fax 740-636-2348

Period Ending NOV 15

TAX ID

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

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Title _____ Date _____

Phone # _____

**THIS RETURN MUST BE FILED ON
OR BEFORE DECEMBER 3, 2024**

MAKE CHECK OR MONEY ORDER TO:

JEFFERSON TWP-WASHINGTON CH JEDD

% CITY OF WASHINGTON

117 N MAIN ST

WASHINGTON CH OH 43160

Voice 740-636-2342 Ext

Fax 740-636-2348

Period Ending NOV 30

TAX ID

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

FORM W1 1108

EMPLOYER'S WITHHOLDING - SEMI-MONTHLY

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OR BEFORE DECEMBER 18, 2024**

MAKE CHECK OR MONEY ORDER TO:

JEFFERSON TWP-WASHINGTON CH JEDD

% CITY OF WASHINGTON

117 N MAIN ST

WASHINGTON CH OH 43160

Voice 740-636-2342 Ext

Fax 740-636-2348

Period Ending DEC 15

TAX ID

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**THIS RETURN MUST BE FILED ON
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MAKE CHECK OR MONEY ORDER TO:

JEFFERSON TWP-WASHINGTON CH JEDD

% CITY OF WASHINGTON

117 N MAIN ST

WASHINGTON CH OH 43160

Voice 740-636-2342 Ext

Fax 740-636-2348

Period Ending DEC 31

TAX ID

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