

1. Number of Taxable Employees.....

2. Total Salaries, Wages, Commissions and other Compensation paid all employees.....

3. Taxable Earnings (from line 2).....

4. Actual Tax Withheld at 1.750 %.....

5. Adjustments of Tax for Prior Period.....

6. Interest - 0.750 per month.....

7. Penalty - 50%.....

8. Total (Include Interest and Penalty if Due).....

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Tax Year 2026

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, 2026**

MAKE CHECK OR MONEY ORDER TO:

CITY OF WASHINGTON COURT HOUSE
117 N. MAIN STREET
WASHINGTON C. H. OH 43160

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

Name

And

Address

Period Ending JANUARY

TAX ID

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

FORM W1 1108

EMPLOYER'S WITHHOLDING - MONTHLY

1. Number of Taxable Employees.....
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Name

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Address

Tax Year 2026

I hereby certify that the information and statements contained herein 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, 2026**MAKE CHECK OR MONEY ORDER TO:**

CITY OF WASHINGTON COURT HOUSE
 117 N. MAIN STREET
 WASHINGTON C. H. OH 43160

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

Period Ending FEBRUARY

TAX ID

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

FORM W1 1108

EMPLOYER'S WITHHOLDING - MONTHLY

1. Number of Taxable Employees.....
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Name

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Address

Tax Year 2026

I hereby certify that the information and statements contained herein 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, 2026**MAKE CHECK OR MONEY ORDER TO:**

CITY OF WASHINGTON COURT HOUSE
 117 N. MAIN STREET
 WASHINGTON C. H. OH 43160

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

Period Ending MARCH

TAX ID

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

FORM W1 1108

EMPLOYER'S WITHHOLDING - MONTHLY

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Name

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Address

Tax Year 2026

I hereby certify that the information and statements contained herein 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, 2026**MAKE CHECK OR MONEY ORDER TO:**

CITY OF WASHINGTON COURT HOUSE
 117 N. MAIN STREET
 WASHINGTON C. H. OH 43160

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

Period Ending APRIL

TAX ID

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

FORM W1 1108

EMPLOYER'S WITHHOLDING - MONTHLY

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Tax Year 2026

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, 2026**

MAKE CHECK OR MONEY ORDER TO:

CITY OF WASHINGTON COURT HOUSE
117 N. MAIN STREET
WASHINGTON C. H. OH 43160

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

Name

And

Address

Period Ending MAY

TAX ID

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

FORM W1 1108

EMPLOYER'S WITHHOLDING - MONTHLY

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Tax Year 2026

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, 2026**

MAKE CHECK OR MONEY ORDER TO:
CITY OF WASHINGTON COURT HOUSE
117 N. MAIN STREET
WASHINGTON C. H. OH 43160

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

Name

And

Address

Period Ending JUNE

TAX ID

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

FORM W1 1108

EMPLOYER'S WITHHOLDING - MONTHLY

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Tax Year 2026

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, 2026**

MAKE CHECK OR MONEY ORDER TO:
CITY OF WASHINGTON COURT HOUSE
117 N. MAIN STREET
WASHINGTON C. H. OH 43160

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

Name

And

Address

Period Ending JULY

TAX ID

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

FORM W1 1108

EMPLOYER'S WITHHOLDING - MONTHLY

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Tax Year 2026

I hereby certify that the information and statements contained herein 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, 2026**

MAKE CHECK OR MONEY ORDER TO:

CITY OF WASHINGTON COURT HOUSE
117 N. MAIN STREET
WASHINGTON C. H. OH 43160

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

Name

And

Address

Period Ending AUGUST

TAX ID

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

FORM W1 1108

EMPLOYER'S WITHHOLDING - MONTHLY

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Tax Year 2026

I hereby certify that the information and statements contained herein 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, 2026**

MAKE CHECK OR MONEY ORDER TO:

CITY OF WASHINGTON COURT HOUSE
117 N. MAIN STREET
WASHINGTON C. H. OH 43160

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

Name

And

Address

Period Ending SEPTEMBER

TAX ID

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

FORM W1 1108

EMPLOYER'S WITHHOLDING - MONTHLY

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Tax Year 2026

I hereby certify that the information and statements contained herein 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, 2026**

MAKE CHECK OR MONEY ORDER TO:

CITY OF WASHINGTON COURT HOUSE
117 N. MAIN STREET
WASHINGTON C. H. OH 43160

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

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.

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Tax Year 2026

I hereby certify that the information and statements contained herein 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, 2026**

MAKE CHECK OR MONEY ORDER TO:

CITY OF WASHINGTON COURT HOUSE
117 N. MAIN STREET
WASHINGTON C. H. OH 43160

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

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.

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Tax Year 2026

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Signed _____

Title _____ Date _____

Phone # _____

**THIS RETURN MUST BE FILED ON
OR BEFORE JANUARY 15, 2027**

MAKE CHECK OR MONEY ORDER TO:
CITY OF WASHINGTON COURT HOUSE
117 N. MAIN STREET
WASHINGTON C. H. OH 43160

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

Name

And

Address

Period Ending DECEMBER

TAX ID

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