

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 APRIL 30, 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 JAN-FEB-MAR

**TAX ID**

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

## EMPLOYER'S WITHHOLDING - QUARTERLY

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

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Name

And

Address

**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 31, 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 APR-MAY-JUN

## TAX ID

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

## EMPLOYER'S WITHHOLDING - QUARTERLY

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

And

Address

**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 OCTOBER 31, 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 JUL-AUG-SEP

## TAX ID

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

## EMPLOYER'S WITHHOLDING - QUARTERLY

1. Number of Taxable Employees.....  
 2. Total Salaries, Wages, Commissions and other Compensation paid all employees.....  
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Name

And

Address

**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 JANUARY 31, 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

Period Ending OCT-NOV-DEC

## TAX ID

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