Form W-1 – Employer's Return of Tax Withheld 2007 Fairfield Income Tax Division 513.867.5327

1. Number of Employees _____
2. Payroll Subject to Tax $ _____
3. Tax Liability @1.5% (.015) $ 0.00 *
4. Tax Withheld from Wages $ _____

Federal ID #:
Month/Quarter:
Amount Remitted $ _____ Check #: _____
Make checks payable to: Fairfield Income Tax

Due: 15 days after month end or 30 days after quarter end

Remit to: Fairfield Income Tax Division
701 Wessel Drive
Fairfield, OH 45014

Signature Date Phone Number

Name:

Address:

City, State, Zip:

* automatically calculating field.

Form W-1 – Employer's Return of Tax Withheld 2007 Fairfield Income Tax Division 513.867.5327

1. Number of Employees _____
2. Payroll Subject to Tax $ _____
3. Tax Liability @1.5% (.015) $ 0.00 *
4. Tax Withheld from Wages $ _____

Federal ID #:
Month/Quarter:
Amount Remitted $ _____ Check #: _____
Make checks payable to: Fairfield Income Tax

Due: 15 days after month end or 30 days after quarter end

Remit to: Fairfield Income Tax Division
701 Wessel Drive
Fairfield, OH 45014

Signature Date Phone Number

Name:

Address:

City, State, Zip:

* automatically calculating field.

Form W-1 – Employer's Return of Tax Withheld 2007 Fairfield Income Tax Division 513.867.5327

1. Number of Employees _____
2. Payroll Subject to Tax $ _____
3. Tax Liability @1.5% (.015) $ 0.00 *
4. Tax Withheld from Wages $ _____

Federal ID #:
Month/Quarter:
Amount Remitted $ _____ Check #: _____
Make checks payable to: Fairfield Income Tax

Due: 15 days after month end or 30 days after quarter end

Remit to: Fairfield Income Tax Division
701 Wessel Drive
Fairfield, OH 45014

Signature Date Phone Number

Name:

Address:

City, State, Zip:

* automatically calculating field.