Form W-1 – Employer's Return of Tax Withheld 2019 West Chester JEDD 1 513.867.5327

1. Number of Employees _____
2. Payroll Subject to Tax $ _____
3. Tax Liability @1.0% (.010) $ _____
4. Tax Withheld from Wages $ _____

Federal ID #: Due: **4/30/19**
Quarter: JAN-MAR 2019
Amount Remitted $ _____ Check #: _____
Make checks payable to: **West Chester JEDD 1 - Income Tax**

Remit to: West Chester JEDD 1 - Income Tax
Fairfield Income Tax Division
701 Wessel Dr
Fairfield OH 45014-3611

_____
Signature Date Phone Number

Form W-1 – Employer's Return of Tax Withheld 2019 West Chester JEDD1 513.867.5327

1. Number of Employees _____
2. Payroll Subject to Tax $ _____
3. Tax Liability @1.0% (.010) $ _____
4. Tax Withheld from Wages $ _____

Federal ID #: Due: **7/31/19**
Quarter: APR-JUN 2019
Amount Remitted $ _____ Check #: _____
Make checks payable to: **West Chester JEDD 1 - Income Tax**

Remit to: West Chester JEDD 1 - Income Tax
Fairfield Income Tax Division
701 Wessel Dr
Fairfield OH 45014-3611

_____
Signature Date Phone Number

Form W-1 – Employer's Return of Tax Withheld 2019 West Chester JEDD 1 513.867.5327

1. Number of Employees _____
2. Payroll Subject to Tax $ _____
3. Tax Liability @1.0% (.010) $ _____
4. Tax Withheld from Wages $ _____

Federal ID #: Due: **10/31/19**
Quarter: JUL-SEP 2019
Amount Remitted $ _____ Check #: _____
Make checks payable to: **West Chester JEDD 1 - Income Tax**

Remit to: West Chester JEDD 1 - Income Tax
Fairfield Income Tax Division
701 Wessel Dr
Fairfield OH 45014-3611

_____
Signature Date Phone Number

Form W-1 – Employer's Return of Tax Withheld 2019 West Chester JEDD 1 513.867.5327

1. Number of Employees _____
2. Payroll Subject to Tax $ _____
3. Tax Liability @1.0% (.010) $ _____
4. Tax Withheld from Wages $ _____

Federal ID #: Due: **1/31/20**
Quarter: OCT-DEC 2019
Amount Remitted $ _____ Check #: _____
Make checks payable to: **West Chester JEDD 1 - Income Tax**

Remit to: West Chester JEDD 1 - Income Tax
Fairfield Income Tax Division
701 Wessel Dr
Fairfield OH 45014-3611

_____
Signature Date Phone Number

Form W-1 – Employer's Return of Tax Withheld 2019 West Chester JEDD1 513.867.5327

1. Number of Employees _____
2. Payroll Subject to Tax $ _____
3. Tax Liability @1.0% (.010) $ _____
4. Tax Withheld from Wages $ _____

Federal ID #: Due:
Month/Quarter:
Amount Remitted $ _____ Check #: _____
Make checks payable to: **West Chester JEDD 1 - Income Tax**

Remit to: West Chester JEDD 1 - Income Tax
Fairfield Income Tax Division
701 Wessel Dr
Fairfield OH 45014-3611

_____
Signature Date Phone Number

Form W-1 – Employer's Return of Tax Withheld 2019 West Chester JEDD 1 513.867.5327

1. Number of Employees _____
2. Payroll Subject to Tax $ _____
3. Tax Liability @1.0% (.010) $ _____
4. Tax Withheld from Wages $ _____

Federal ID #: Due:
Month/Quarter:
Amount Remitted $ _____ Check #: _____
Make checks payable to: **West Chester JEDD 1 - Income Tax**

Remit to: West Chester JEDD 1 - Income Tax
Fairfield Income Tax Division
701 Wessel Dr
Fairfield OH 45014-3611

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Signature Date Phone Number