Remit to:

FAIRFIELD INCOME TAX DIVISION
PO BOX 73852
CLEVELAND OH 44193

<table>
<thead>
<tr>
<th>Form W-1 - Employer's Return of Tax Withheld for 2011</th>
<th>Federal ID #:</th>
<th>Due:</th>
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<tr>
<td>1. Number of Employees</td>
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Signature Date

Phone Number

Name ________________________________

Address ______________________________

City _______________ ST _____ Zip ________

Form W-1 - Employer’s Return of Tax Withheld for 2010

1. Number of Employees: __________
2. Payroll subject to Tax: $___________
3. Tax Liability @ 1.5% (.015): $___________
4. Tax Withheld from Wages: $___________

Federal ID #: ____________________________
Month/Quarter: JUL 2010
Amount Remitted: $___________ Check #: ____________
Make checks payable to: Fairfield Income Tax

Signature: ____________________________ Date: ____________
Phone Number: _________________________
Name: ________________________________
Address: _______________________________________
City: ____________ ST: ____________ Zip: ____________

Remit to:
FAIRFIELD INCOME TAX DIVISION
PO BOX 73852
CLEVELAND OH 44193

Fairfield Income Tax Division 513.867.5327

Form W-1 - Employer’s Return of Tax Withheld for 2011

1. Number of Employees: __________
2. Payroll subject to Tax: $___________
3. Tax Liability @ 1.5% (.015): $___________
4. Tax Withheld from Wages: $___________

Federal ID #: ____________________________
Month/Quarter: AUG 2011
Amount Remitted: $___________ Check #: ____________
Make checks payable to: Fairfield Income Tax

Signature: ____________________________ Date: ____________
Phone Number: _________________________
Name: ________________________________
Address: _______________________________________
City: ____________ ST: ____________ Zip: ____________

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PO BOX 73852
CLEVELAND OH 44193

Form W-1 - Employer’s Return of Tax Withheld for 2011

1. Number of Employees: __________
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4. Tax Withheld from Wages: $___________

Federal ID #: ____________________________
Month/Quarter: SEP 2011
Amount Remitted: $___________ Check #: ____________
Make checks payable to: Fairfield Income Tax

Signature: ____________________________ Date: ____________
Phone Number: _________________________
Name: ________________________________
Address: _______________________________________
City: ____________ ST: ____________ Zip: ____________

Remit to:
FAIRFIELD INCOME TAX DIVISION
PO BOX 73852
CLEVELAND OH 44193

Fairfield Income Tax Division 513.867.5327
Form W-1 - Employer’s Return of Tax Withheld for 2011

1. Number of Employees       _________
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3. Tax Liability @ 1.5% (.015) $ ______________
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Fairfield Income Tax Division  513.867.5327

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