Form W-1 – Employer's Return of Tax Withheld 2016 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: **2/15/16**
Month: JAN 2016
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 2016 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: **3/15/16**
Month: FEB 2016
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 2016 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: **4/18/16**
Month: MAR 2016
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 2016 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: **5/16/16**
Month: APR 2016
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 2016 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**: 6/15/16**
Month: MAY 2016
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 2016 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: **7/15/16**
Month: JUN 2016
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 2016 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: **8/15/16**
Month: JUL 2016
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 2016 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: **9/15/16**
Month: AUG 2016
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 2016 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: **10/17/16**
Month: SEP 2016
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 2016 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: **11/15/16**
Month: OCT 2016
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 2016 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: **12/15/16**
Month: NOV 2016
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 2016 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: **1/17/17**
Month: DEC 2016
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