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: **4/18/16**
Quarter: JAN-FEB-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
Include Company name and address or changes below

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: **7/15/16**
Quarter: APR-MAY-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
Include Company name and address or changes below

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: **10/17/16**
Quarter: JUL-AUG-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
Include Company name and address or changes below

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: **1/17/17**
Quarter: OCT-NOV-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
Include Company name and address or changes below

Form W-1 – Employer's Return of Tax Withheld 2016 West Chester JEDD1 513.867.5327

AMENDED PAYMENT (if necessary)

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
Include Company name and address or changes below

Form W-1 – Employer's Return of Tax Withheld 2016 West Chester JEDD1 513.867.5327

AMENDED PAYMENT (if necessary)

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
Include Company name and address or changes below