

1. Number of Taxable Employees. ....	1	
2. Total Salaries, Wages, Commissions and other Compensation paid all employees. ....	2	
3. Taxable Earnings (from line 2). ....	3	
4. Actual Tax Withheld at 2.000 %. ....	4	
5. Adjustments of Tax for Prior Period. ....	5	
6. Interest - 1.5% per month. ....	6	
7. Penalty - 5% 1st month; 10% 2nd month; 15% 3rd month. ....	7	
8. Total (Include Interest and Penalty if Due). ....	8	

Tax Year 2008

I hereby certify that the information and statements contained here in and in any schedules or exhibits attached are true and correct.

Signed \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_

Phone # \_\_\_\_\_

**THIS RETURN MUST BE FILED ON OR BEFORE FEBRUARY 29, 2008**

**MAKE CHECK OR MONEY ORDER TO:**

WARREN CITY INCOME TAX  
P.O. BOX 230  
WARREN OH 44482-0230

Voice 330-841-2551 Fax 330-841-2626

Name \_\_\_\_\_

And \_\_\_\_\_

Address \_\_\_\_\_

Period Ending JANUARY

TAX ID \_\_\_\_\_

NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.

1. Number of Taxable Employees. ....	1	
2. Total Salaries, Wages, Commissions and other Compensation paid all employees. ....	2	
3. Taxable Earnings (from line 2). ....	3	
4. Actual Tax Withheld at 2.000 %. ....	4	
5. Adjustments of Tax for Prior Period. ....	5	
6. Interest - 1.5% per month. ....	6	
7. Penalty - 5% 1st month; 10% 2nd month; 15% 3rd month. ....	7	
8. Total (Include Interest and Penalty if Due). ....	8	

Tax Year 2008

I hereby certify that the information and statements contained here in and in any schedules or exhibits attached are true and correct.

Signed \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_

Phone # \_\_\_\_\_

**THIS RETURN MUST BE FILED ON OR BEFORE MARCH 31, 2008**

**MAKE CHECK OR MONEY ORDER TO:**

WARREN CITY INCOME TAX  
P.O. BOX 230  
WARREN OH 44482-0230

Voice 330-841-2551 Fax 330-841-2626

Name \_\_\_\_\_

And \_\_\_\_\_

Address \_\_\_\_\_

Period Ending FEBRUARY

TAX ID \_\_\_\_\_

NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.

1. Number of Taxable Employees. ....	1	
2. Total Salaries, Wages, Commissions and other Compensation paid all employees. ....	2	
3. Taxable Earnings (from line 2). ....	3	
4. Actual Tax Withheld at 2.000 %. ....	4	
5. Adjustments of Tax for Prior Period. ....	5	
6. Interest - 1.5% per month. ....	6	
7. Penalty - 5% 1st month; 10% 2nd month; 15% 3rd month. ....	7	
8. Total (Include Interest and Penalty if Due). ....	8	

**Tax Year 2008**

I hereby certify that the information and statements contained here in and in any schedules or exhibits attached are true and correct.

Signed \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_

Phone # \_\_\_\_\_

**THIS RETURN MUST BE FILED ON  
OR BEFORE APRIL 30, 2008**

**MAKE CHECK OR MONEY ORDER TO:**  
WARREN CITY INCOME TAX  
P.O. BOX 230  
WARREN OH 44482-0230

Voice 330-841-2551 Fax 330-841-2626

Name \_\_\_\_\_  
And \_\_\_\_\_  
Address \_\_\_\_\_

Period Ending MARCH

TAX ID \_\_\_\_\_

NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.

1. Number of Taxable Employees. ....	1	
2. Total Salaries, Wages, Commissions and other Compensation paid all employees. ....	2	
3. Taxable Earnings (from line 2). ....	3	
4. Actual Tax Withheld at 2.000 %. ....	4	
5. Adjustments of Tax for Prior Period. ....	5	
6. Interest - 1.5% per month. ....	6	
7. Penalty - 5% 1st month; 10% 2nd month; 15% 3rd month. ....	7	
8. Total (Include Interest and Penalty if Due). ....	8	

**Tax Year 2008**

I hereby certify that the information and statements contained here in and in any schedules or exhibits attached are true and correct.

Signed \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_

Phone # \_\_\_\_\_

**THIS RETURN MUST BE FILED ON  
OR BEFORE MAY 31, 2008**

**MAKE CHECK OR MONEY ORDER TO:**  
WARREN CITY INCOME TAX  
P.O. BOX 230  
WARREN OH 44482-0230

Voice 330-841-2551 Fax 330-841-2626

Name \_\_\_\_\_  
And \_\_\_\_\_  
Address \_\_\_\_\_

Period Ending APRIL

TAX ID \_\_\_\_\_

NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.

1. Number of Taxable Employees. ....	1	
2. Total Salaries, Wages, Commissions and other Compensation paid all employees. ....	2	
3. Taxable Earnings (from line 2). ....	3	
4. Actual Tax Withheld at 2.000 %. ....	4	
5. Adjustments of Tax for Prior Period. ....	5	
6. Interest - 1.5% per month. ....	6	
7. Penalty - 5% 1st month; 10% 2nd month; 15% 3rd month. ....	7	
8. Total (Include Interest and Penalty if Due). ....	8	

Tax Year 2008

I hereby certify that the information and statements contained here in and in any schedules or exhibits attached are true and correct.

Signed \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_

Phone # \_\_\_\_\_

**THIS RETURN MUST BE FILED ON OR BEFORE JUNE 30, 2008**

**MAKE CHECK OR MONEY ORDER TO:**

WARREN CITY INCOME TAX  
P.O. BOX 230  
WARREN OH 44482-0230

Voice 330-841-2551 Fax 330-841-2626

Name \_\_\_\_\_  
 And \_\_\_\_\_  
 Address \_\_\_\_\_

Period Ending MAY

TAX ID \_\_\_\_\_

NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.

1. Number of Taxable Employees. ....	1	
2. Total Salaries, Wages, Commissions and other Compensation paid all employees. ....	2	
3. Taxable Earnings (from line 2). ....	3	
4. Actual Tax Withheld at 2.000 %. ....	4	
5. Adjustments of Tax for Prior Period. ....	5	
6. Interest - 1.5% per month. ....	6	
7. Penalty - 5% 1st month; 10% 2nd month; 15% 3rd month. ....	7	
8. Total (Include Interest and Penalty if Due). ....	8	

Tax Year 2008

I hereby certify that the information and statements contained here in and in any schedules or exhibits attached are true and correct.

Signed \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_

Phone # \_\_\_\_\_

**THIS RETURN MUST BE FILED ON OR BEFORE JULY 31, 2008**

**MAKE CHECK OR MONEY ORDER TO:**

WARREN CITY INCOME TAX  
P.O. BOX 230  
WARREN OH 44482-0230

Voice 330-841-2551 Fax 330-841-2626

Name \_\_\_\_\_  
 And \_\_\_\_\_  
 Address \_\_\_\_\_

Period Ending JUNE

TAX ID \_\_\_\_\_

NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.

1. Number of Taxable Employees. ....	1	
2. Total Salaries, Wages, Commissions and other Compensation paid all employees. ....	2	
3. Taxable Earnings (from line 2). ....	3	
4. Actual Tax Withheld at 2.000 %. ....	4	
5. Adjustments of Tax for Prior Period. ....	5	
6. Interest - 1.5% per month. ....	6	
7. Penalty - 5% 1st month; 10% 2nd month; 15% 3rd month. ....	7	
8. Total (Include Interest and Penalty if Due). ....	8	

**Tax Year 2008**

I hereby certify that the information and statements contained here in and in any schedules or exhibits attached are true and correct.

Signed \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_

Phone # \_\_\_\_\_

**THIS RETURN MUST BE FILED ON  
OR BEFORE AUGUST 31, 2008**

**MAKE CHECK OR MONEY ORDER TO:**  
WARREN CITY INCOME TAX  
P.O. BOX 230  
WARREN OH 44482-0230

Voice 330-841-2551 Fax 330-841-2626

Name \_\_\_\_\_  
And \_\_\_\_\_  
Address \_\_\_\_\_

Period Ending JULY

TAX ID \_\_\_\_\_

NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.

1. Number of Taxable Employees. ....	1	
2. Total Salaries, Wages, Commissions and other Compensation paid all employees. ....	2	
3. Taxable Earnings (from line 2). ....	3	
4. Actual Tax Withheld at 2.000 %. ....	4	
5. Adjustments of Tax for Prior Period. ....	5	
6. Interest - 1.5% per month. ....	6	
7. Penalty - 5% 1st month; 10% 2nd month; 15% 3rd month. ....	7	
8. Total (Include Interest and Penalty if Due). ....	8	

**Tax Year 2008**

I hereby certify that the information and statements contained here in and in any schedules or exhibits attached are true and correct.

Signed \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_

Phone # \_\_\_\_\_

**THIS RETURN MUST BE FILED ON  
OR BEFORE SEPTEMBER 30, 2008**

**MAKE CHECK OR MONEY ORDER TO:**  
WARREN CITY INCOME TAX  
P.O. BOX 230  
WARREN OH 44482-0230

Voice 330-841-2551 Fax 330-841-2626

Name \_\_\_\_\_  
And \_\_\_\_\_  
Address \_\_\_\_\_

Period Ending AUGUST

TAX ID \_\_\_\_\_

NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.

1. Number of Taxable Employees. ....	1		
2. Total Salaries, Wages, Commissions and other Compensation paid all employees. ....	2		
3. Taxable Earnings (from line 2). ....	3		
4. Actual Tax Withheld at 2.000 %. ....	4		
5. Adjustments of Tax for Prior Period. ....	5		
6. Interest - 1.5% per month. ....	6		
7. Penalty - 5% 1st month; 10% 2nd month; 15% 3rd month. ....	7		
8. Total (Include Interest and Penalty if Due). ....	8		

Name  
 And  
 Address

**Tax Year 2008**

I hereby certify that the information and statements contained here in and in any schedules or exhibits attached are true and correct.

Signed \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_

Phone # \_\_\_\_\_

**THIS RETURN MUST BE FILED ON  
 OR BEFORE OCTOBER 31, 2008**

**MAKE CHECK OR MONEY ORDER TO:**  
 WARREN CITY INCOME TAX  
 P.O. BOX 230  
 WARREN OH 44482-0230

Voice 330-841-2551 Fax 330-841-2626

Period Ending **SEPTEMBER**

**TAX ID**

NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.

1. Number of Taxable Employees. ....	1		
2. Total Salaries, Wages, Commissions and other Compensation paid all employees. ....	2		
3. Taxable Earnings (from line 2). ....	3		
4. Actual Tax Withheld at 2.000 %. ....	4		
5. Adjustments of Tax for Prior Period. ....	5		
6. Interest - 1.5% per month. ....	6		
7. Penalty - 5% 1st month; 10% 2nd month; 15% 3rd month. ....	7		
8. Total (Include Interest and Penalty if Due). ....	8		

Name  
 And  
 Address

**Tax Year 2008**

I hereby certify that the information and statements contained here in and in any schedules or exhibits attached are true and correct.

Signed \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_

Phone # \_\_\_\_\_

**THIS RETURN MUST BE FILED ON  
 OR BEFORE NOVEMBER 30, 2008**

**MAKE CHECK OR MONEY ORDER TO:**  
 WARREN CITY INCOME TAX  
 P.O. BOX 230  
 WARREN OH 44482-0230

Voice 330-841-2551 Fax 330-841-2626

Period Ending **OCTOBER**

**TAX ID**

NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.

**FORM W1 1107**

**EMPLOYER'S WITHHOLDING - MONTHLY**

1. Number of Taxable Employees. ....	1		
2. Total Salaries, Wages, Commissions and other Compensation paid all employees. ....	2		
3. Taxable Earnings (from line 2). ....	3		
4. Actual Tax Withheld at 2.000 %. ....	4		
5. Adjustments of Tax for Prior Period. ....	5		
6. Interest - 1.5% per month. ....	6		
7. Penalty - 5% 1st month; 10% 2nd month; 15% 3rd month. ....	7		
8. Total (Include Interest and Penalty if Due). ....	8		

Name  
And  
Address

**Tax Year 2008**

I hereby certify that the information and statements contained here in and in any schedules or exhibits attached are true and correct.

Signed \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_

Phone # \_\_\_\_\_

**THIS RETURN MUST BE FILED ON  
OR BEFORE DECEMBER 31, 2008**

**MAKE CHECK OR MONEY ORDER TO:**  
WARREN CITY INCOME TAX  
P.O. BOX 230  
WARREN OH 44482-0230

Voice 330-841-2551 Fax 330-841-2626

Period Ending **NOVEMBER**

**TAX ID**

NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.

**FORM W1 1107**

**EMPLOYER'S WITHHOLDING - MONTHLY**

1. Number of Taxable Employees. ....	1		
2. Total Salaries, Wages, Commissions and other Compensation paid all employees. ....	2		
3. Taxable Earnings (from line 2). ....	3		
4. Actual Tax Withheld at 2.000 %. ....	4		
5. Adjustments of Tax for Prior Period. ....	5		
6. Interest - 1.5% per month. ....	6		
7. Penalty - 5% 1st month; 10% 2nd month; 15% 3rd month. ....	7		
8. Total (Include Interest and Penalty if Due). ....	8		

Name  
And  
Address

**Tax Year 2008**

I hereby certify that the information and statements contained here in and in any schedules or exhibits attached are true and correct.

Signed \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_

Phone # \_\_\_\_\_

**THIS RETURN MUST BE FILED ON  
OR BEFORE JANUARY 31, 2009**

**MAKE CHECK OR MONEY ORDER TO:**  
WARREN CITY INCOME TAX  
P.O. BOX 230  
WARREN OH 44482-0230

Voice 330-841-2551 Fax 330-841-2626

Period Ending **DECEMBER**

**TAX ID**

NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.