

CELINA RETURN OF TAX WITHHELD (1%)

ACCOUNT # _____ YEAR _____
Tax Administrator, City Hall - 2nd Floor,
P.O. Box 117, Celina, Ohio 45822-0117

Due on or Before April 30th - Voucher ()
Period January 1st thru March 31st

I declare that this return has been examined by me, and to the best of my knowledge and belief is a true, correct and complete return, made in good faith, pursuant to Municipal Income Tax Ordinance and the Regulations issued under the authority thereof. **PLEASE TYPE OR PRINT CLEARLY**

Form W-1 Revised 11-04

- 1. Total Compensation Paid This Period..... \$ _____
- 2. Total Withheld This Period..... \$ _____
- 3. Adjustments To Prior Returns..... \$ _____
- 4. Total Payable Herewith..... \$ _____
- 5. Total Payable With Penalty & Interest..... \$ _____

Authorized Signature X _____
Fed. I.D. # _____ - _____

PENALTY: 3% per month, or fraction thereof (minimum \$10.00 charge)
INTEREST: 1% per month or fraction thereof

CELINA RETURN OF TAX WITHHELD (1%)

ACCOUNT # _____ YEAR _____
Tax Administrator, City Hall - 2nd Floor,
P.O. Box 117, Celina, Ohio 45822-0117

Due on or Before July 31st - Voucher ()
Period April 1st thru June 30th

I declare that this return has been examined by me, and to the best of my knowledge and belief is a true, correct and complete return, made in good faith, pursuant to Municipal Income Tax Ordinance and the Regulations issued under the authority thereof. **PLEASE TYPE OR PRINT CLEARLY**

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CELINA RETURN OF TAX WITHHELD (1%)

ACCOUNT # _____ YEAR _____
Tax Administrator, City Hall - 2nd Floor,
P.O. Box 117, Celina, Ohio 45822-0117

Due on or Before October 31st - Voucher ()
Period July 1st thru September 30th

I declare that this return has been examined by me, and to the best of my knowledge and belief is a true, correct and complete return, made in good faith, pursuant to Municipal Income Tax Ordinance and the Regulations issued under the authority thereof. **PLEASE TYPE OR PRINT CLEARLY**

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CELINA RETURN OF TAX WITHHELD (1%)

ACCOUNT # _____ YEAR _____
Tax Administrator, City Hall - 2nd Floor,
P.O. Box 117, Celina, Ohio 45822-0117

Due on or Before January 31st - Voucher ()
Period October 1st thru December 31st

I declare that this return has been examined by me, and to the best of my knowledge and belief is a true, correct and complete return, made in good faith, pursuant to Municipal Income Tax Ordinance and the Regulations issued under the authority thereof. **PLEASE TYPE OR PRINT CLEARLY**

Form W-1 Revised 11-04

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