

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 1.750 %.....	4	
5. Adjustments of Tax for Prior Period.....	5	
6. 10% per annum.....	6	
7. 3% per month.....	7	
8. Total (Include Interest and Penalty if Due).....	8	

**Tax Year 2023**

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 15, 2023**

**MAKE CHECK OR MONEY ORDER TO:**

VILLAGE OF EDON  
P O Box 338  
Edon OH 43518

Voice 419-272-2152 Ext Fax 419-272-2249

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 1.750 %.....	4	
5. Adjustments of Tax for Prior Period.....	5	
6. 10% per annum.....	6	
7. 3% per month.....	7	
8. Total (Include Interest and Penalty if Due).....	8	

**Tax Year 2023**

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 15, 2023**

**MAKE CHECK OR MONEY ORDER TO:**

VILLAGE OF EDON  
P O Box 338  
Edon OH 43518

Voice 419-272-2152 Ext Fax 419-272-2249

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 1.750 %.....	4	
5. Adjustments of Tax for Prior Period.....	5	
6. 10% per annum.....	6	
7. 3% per month.....	7	
8. Total (Include Interest and Penalty if Due).....	8	

**Tax Year 2023**

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 15, 2023**

**MAKE CHECK OR MONEY ORDER TO:**

VILLAGE OF EDON  
P O Box 338  
Edon OH 43518

Voice 419-272-2152 Ext Fax 419-272-2249

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 1.750 %.....	4	
5. Adjustments of Tax for Prior Period.....	5	
6. 10% per annum.....	6	
7. 3% per month.....	7	
8. Total (Include Interest and Penalty if Due).....	8	

**Tax Year 2023**

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 15, 2023**

**MAKE CHECK OR MONEY ORDER TO:**

VILLAGE OF EDON  
P O Box 338  
Edon OH 43518

Voice 419-272-2152 Ext Fax 419-272-2249

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 1.750 %.....	4	
5. Adjustments of Tax for Prior Period.....	5	
6. 10% per annum.....	6	
7. 3% per month.....	7	
8. Total (Include Interest and Penalty if Due).....	8	

**Tax Year 2023**

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 15, 2023**

**MAKE CHECK OR MONEY ORDER TO:**

VILLAGE OF EDON  
P O Box 338  
Edon OH 43518

Voice 419-272-2152 Ext Fax 419-272-2249

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 1.750 %.....	4	
5. Adjustments of Tax for Prior Period.....	5	
6. 10% per annum.....	6	
7. 3% per month.....	7	
8. Total (Include Interest and Penalty if Due).....	8	

**Tax Year 2023**

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 15, 2023**

**MAKE CHECK OR MONEY ORDER TO:**

VILLAGE OF EDON  
P O Box 338  
Edon OH 43518

Voice 419-272-2152 Ext Fax 419-272-2249

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 1.750 %.....	4	
5. Adjustments of Tax for Prior Period.....	5	
6. 10% per annum.....	6	
7. 3% per month.....	7	
8. Total (Include Interest and Penalty if Due).....	8	

**Tax Year 2023**

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 15, 2023**

**MAKE CHECK OR MONEY ORDER TO:**

VILLAGE OF EDON  
P O Box 338  
Edon OH 43518

Voice 419-272-2152 Ext Fax 419-272-2249

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 1.750 %.....	4	
5. Adjustments of Tax for Prior Period.....	5	
6. 10% per annum.....	6	
7. 3% per month.....	7	
8. Total (Include Interest and Penalty if Due).....	8	

**Tax Year 2023**

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 15, 2023**

**MAKE CHECK OR MONEY ORDER TO:**

VILLAGE OF EDON  
P O Box 338  
Edon OH 43518

Voice 419-272-2152 Ext Fax 419-272-2249

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 1.750 %.....	4	
5. Adjustments of Tax for Prior Period.....	5	
6. 10% per annum.....	6	
7. 3% per month.....	7	
8. Total (Include Interest and Penalty if Due).....	8	

**Tax Year 2023**

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 15, 2023**

**MAKE CHECK OR MONEY ORDER TO:**

VILLAGE OF EDON  
P O Box 338  
Edon OH 43518

Voice 419-272-2152 Ext Fax 419-272-2249

Name

And

Address

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 1.750 %.....	4	
5. Adjustments of Tax for Prior Period.....	5	
6. 10% per annum.....	6	
7. 3% per month.....	7	
8. Total (Include Interest and Penalty if Due).....	8	

**Tax Year 2023**

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 15, 2023**

**MAKE CHECK OR MONEY ORDER TO:**

VILLAGE OF EDON  
P O Box 338  
Edon OH 43518

Voice 419-272-2152 Ext Fax 419-272-2249

Name

And

Address

Period Ending **OCTOBER**

**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 1.750 %.....	4	
5. Adjustments of Tax for Prior Period.....	5	
6. 10% per annum.....	6	
7. 3% per month.....	7	
8. Total (Include Interest and Penalty if Due).....	8	

**Tax Year 2023**

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 15, 2023**

**MAKE CHECK OR MONEY ORDER TO:**

VILLAGE OF EDON  
P O Box 338  
Edon OH 43518

Voice 419-272-2152 Ext Fax 419-272-2249

Name \_\_\_\_\_

And \_\_\_\_\_

Address \_\_\_\_\_

Period Ending NOVEMBER

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 1.750 %.....	4	
5. Adjustments of Tax for Prior Period.....	5	
6. 10% per annum.....	6	
7. 3% per month.....	7	
8. Total (Include Interest and Penalty if Due).....	8	

**Tax Year 2023**

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 15, 2024**

**MAKE CHECK OR MONEY ORDER TO:**

VILLAGE OF EDON  
P O Box 338  
Edon OH 43518

Voice 419-272-2152 Ext Fax 419-272-2249

Name \_\_\_\_\_

And \_\_\_\_\_

Address \_\_\_\_\_

Period Ending DECEMBER

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

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