W - 1

## EMPLOYER'S QUARTERLY/MONTHLY RETURN OF TAX WITHHELD

**NORTH COLLEGE HILL TAX DEPT.**
1500 W. GALBRAITH
CINCINNATI, OH 45231
(513) 931-1159

NOTE: EFFECTIVE 01/01/2006 NO CREDIT IS ALLOWED FOR OTHER LOCAL TAX PAID.

1. TAXABLE EARNINGS _____
2. NCH TAX - 1½% OF LINE 1 _____
3. ACTUAL TAX WITHHELD DURING PERIOD _____
4. ADJUSTMENTS OF TAX FOR PRIOR PERIOD _____
5. TOTAL TAX PAID _____

NUMBER OF EMPLOYEES [ ]

**THIS RETURN MUST BE FILED ON OR BEFORE DATE SHOWN BELOW**

IMPORTANT ▼
DUE ON OR BEFORE
FOR MONTHS OF

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

(SIGNED) _____
( PHONE NO. ) _____

**FEDERAL I.D. NO. OR S.S. NO.**

**I HEREBY CERTIFY THAT THE INFORMATION AND STATEMENTS CONTAINED HEREIN ARE TRUE AND CORRECT**

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