

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 1.500 %. ....	4		
5. Adjustments of Tax for Prior Period. ....	5		
6. Interest 1/2 % (of line 4) per month past due. ....	6		
7. Penalty 5 % (of line 4) per month past due. ....	7		
8. Total (Include Interest and Penalty if Due). ....	8		

**Tax Year 2015**

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, 2015**

**MAKE CHECK OR MONEY ORDER TO:**  
VILLAGE OF SPENCERVILLE INCOME TAX  
PO BOX 57  
Spencerville OH 45887

Voice 419-647-4171 Fax 419-647-2024

Name

And

Address

Period Ending JAN-FEB-MAR

TAX ID

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

**FORM W1 1224**

**EMPLOYER'S WITHHOLDING - QUARTERLY**

1. Number of Taxable Employees. ....	1		
2. Total Salaries, Wages, Commissions and other Compensation paid all employees. ....	2		
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8. Total (Include Interest and Penalty if Due). ....	8		

Name \_\_\_\_\_

And \_\_\_\_\_

Address \_\_\_\_\_

**Tax Year 2015**

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, 2015**

**MAKE CHECK OR MONEY ORDER TO:**  
VILLAGE OF SPENCERVILLE INCOME TAX  
PO BOX 57  
Spencerville OH 45887

Voice 419-647-4171 Fax 419-647-2024

Period Ending APR-MAY-JUN

TAX ID

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

**FORM W1 1224**

**EMPLOYER'S WITHHOLDING - QUARTERLY**

1. Number of Taxable Employees. ....	1		
2. Total Salaries, Wages, Commissions and other Compensation paid all employees. ....	2		
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8. Total (Include Interest and Penalty if Due). ....	8		

Name \_\_\_\_\_

And \_\_\_\_\_

Address \_\_\_\_\_

**Tax Year 2015**

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, 2015**

**MAKE CHECK OR MONEY ORDER TO:**  
VILLAGE OF SPENCERVILLE INCOME TAX  
PO BOX 57  
Spencerville OH 45887

Voice 419-647-4171 Fax 419-647-2024

Period Ending JUL-AUG-SEP

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		
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8. Total (Include Interest and Penalty if Due). ....	8		

**Tax Year 2015**

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, 2016**

**MAKE CHECK OR MONEY ORDER TO:**  
VILLAGE OF SPENCERVILLE INCOME TAX  
PO BOX 57  
Spencerville OH 45887

Voice 419-647-4171 Fax 419-647-2024

Name \_\_\_\_\_

And \_\_\_\_\_

Address \_\_\_\_\_

Period Ending OCT-NOV-DEC

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

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