

EMPLOYER'S QUARTERLY RETURN OF TAX WITHHELD**1**

| | | DO NOT ROUND |
|----|---|--------------|
| 1. | Taxable Earnings Paid All Employees Subject To City Income Tax .. | 1. \$ |
| 2. | City Income Tax 1% of Line 1..... | 2. \$ |
| 3. | Actual Tax Withheld in Quarter for City Income Tax..... | 3. \$ |
| 4. | Adjustments of Tax for Prior Quarter | 4. \$ |
| 5. | Penalty/Interest | 5. \$ |
| 6. | Total, Include Interest and Penalty if any..... | 6. \$ |

MAKE CHECK PAYABLE TO:

**CITY OF LEBANON
INCOME TAX DEPARTMENT
50 S. BROADWAY
LEBANON, OH 45036-1777**

PHONE: (513) 933-7205**EIN NO: PIN:****ACCOUNT NO:**

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

(SIGNED) _____

(OFFICIAL TITLE) _____

PHONE _____

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

Number of Taxable Employees..... _____

FILING REQUIRED EVEN IF NO
TAX DUE FOR THE PERIOD

DUE ON OR BEFORE
APRIL 15, 2010

FOR THE MONTHS OF
JAN, FEB, MAR 2010

EMPLOYER'S QUARTERLY RETURN OF TAX WITHHELD**2**

| | | DO NOT ROUND |
|----|---|--------------|
| 1. | Taxable Earnings Paid All Employees Subject To City Income Tax .. | 1. \$ |
| 2. | City Income Tax 1% of Line 1..... | 2. \$ |
| 3. | Actual Tax Withheld in Quarter for City Income Tax..... | 3. \$ |
| 4. | Adjustments of Tax for Prior Quarter | 4. \$ |
| 5. | Penalty/Interest | 5. \$ |
| 6. | Total, Include Interest and Penalty if any..... | 6. \$ |

MAKE CHECK PAYABLE TO:

**CITY OF LEBANON
INCOME TAX DEPARTMENT
50 S. BROADWAY
LEBANON, OH 45036-1777**

PHONE: (513) 933-7205**EIN NO: PIN:****ACCOUNT NO:**

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

(SIGNED) _____

(OFFICIAL TITLE) _____

PHONE _____

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

Number of Taxable Employees..... _____

FILING REQUIRED EVEN IF NO
TAX DUE FOR THE PERIOD

DUE ON OR BEFORE
JULY 15, 2010

FOR THE MONTHS OF
APR, MAY, JUN 2010

EMPLOYER'S QUARTERLY RETURN OF TAX WITHHELD**3**

| | | DO NOT ROUND |
|----|---|--------------|
| 1. | Taxable Earnings Paid All Employees Subject To City Income Tax .. | 1. \$ |
| 2. | City Income Tax 1% of Line 1..... | 2. \$ |
| 3. | Actual Tax Withheld in Quarter for City Income Tax..... | 3. \$ |
| 4. | Adjustments of Tax for Prior Quarter | 4. \$ |
| 5. | Penalty/Interest | 5. \$ |
| 6. | Total, Include Interest and Penalty if any..... | 6. \$ |

MAKE CHECK PAYABLE TO:

**CITY OF LEBANON
INCOME TAX DEPARTMENT
50 S. BROADWAY
LEBANON, OH 45036-1777**

PHONE: (513) 933-7205**EIN NO: PIN:****ACCOUNT NO:**

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

(SIGNED) _____

(OFFICIAL TITLE) _____

PHONE _____

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

Number of Taxable Employees..... _____

FILING REQUIRED EVEN IF NO
TAX DUE FOR THE PERIOD

DUE ON OR BEFORE
OCTOBER 15, 2010

FOR THE MONTHS OF
JUL, AUG, SEP 2010

