

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 2.000 %.....	4	
5. Adjustments of Tax for Prior Period.....	5	
6. Interest: .42% per month.....	6	
7. P1 up to \$150 / P2 = 50%.....	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:**

CITY OF CANAL FULTON  
155 E. MARKET ST.  
SUITE C  
CANAL FULTON OH 44614

Voice 330-854-9448 Fax 330-854-6260

Name \_\_\_\_\_

And \_\_\_\_\_

Address \_\_\_\_\_

Period Ending JAN-FEB-MAR

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 2.000 %.....	4	
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6. Interest: .42% per month.....	6	
7. P1 up to \$150 / P2 = 50%.....	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:**

CITY OF CANAL FULTON  
155 E. MARKET ST.  
SUITE C  
CANAL FULTON OH 44614

Voice 330-854-9448 Fax 330-854-6260

Name \_\_\_\_\_

And \_\_\_\_\_

Address \_\_\_\_\_

Period Ending APR-MAY-JUN

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

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

FORM W1 1072

EMPLOYER'S WITHHOLDING - QUARTERLY

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 2.000 %.....	4	
5. Adjustments of Tax for Prior Period.....	5	
6. Interest: .42% per month.....	6	
7. P1 up to \$150 / P2 = 50%.....	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:**

CITY OF CANAL FULTON  
155 E. MARKET ST.  
SUITE C  
CANAL FULTON OH 44614

Voice 330-854-9448 Fax 330-854-6260

Name \_\_\_\_\_

And \_\_\_\_\_

Address \_\_\_\_\_

Period Ending JUL-AUG-SEP

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

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

FORM W1 1072

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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4. Actual Tax Withheld at 2.000 %.....	4	
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6. Interest: .42% per month.....	6	
7. P1 up to \$150 / P2 = 50%.....	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 28, 2024**

**MAKE CHECK OR MONEY ORDER TO:**

CITY OF CANAL FULTON  
155 E. MARKET ST.  
SUITE C  
CANAL FULTON OH 44614

Voice 330-854-9448 Fax 330-854-6260

Name \_\_\_\_\_

And \_\_\_\_\_

Address \_\_\_\_\_

Period Ending OCT-NOV-DEC

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

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