



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 1.000 %.....	4	
5. Adjustments of Tax for Prior Period.....	5	
6. .42 per month.....	6	
7. 50%.....	7	
8. Total (Include Interest and Penalty If Due).....	8	

Tax Year 2022

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, 2022**

MAKE CHECK OR MONEY ORDER TO:
VILLAGE OF WEST JEFFERSON INCOME TAX
28 EAST MAIN STREET
WEST JEFFERSON OH 43162-0048

Voice 614-879-9757 Ext Fax 614-879-5338

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 1.000 %.....	4	
5. Adjustments of Tax for Prior Period.....	5	
6. .42 per month.....	6	
7. 50%.....	7	
8. Total (Include Interest and Penalty If Due).....	8	

Tax Year 2022

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, 2022**

MAKE CHECK OR MONEY ORDER TO:
VILLAGE OF WEST JEFFERSON INCOME TAX
28 EAST MAIN STREET
WEST JEFFERSON OH 43162-0048

Voice 614-879-9757 Ext Fax 614-879-5338

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 1.000 %.....	4	
5. Adjustments of Tax for Prior Period.....	5	
6. .42 per month.....	6	
7. 50%.....	7	
8. Total (Include Interest and Penalty If Due).....	8	

Tax Year 2022

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, 2022**

MAKE CHECK OR MONEY ORDER TO:
VILLAGE OF WEST JEFFERSON INCOME TAX
28 EAST MAIN STREET
WEST JEFFERSON OH 43162-0048

Voice 614-879-9757 Ext Fax 614-879-5338

Name
And
Address

Period Ending MARCH

TAX ID



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 1.000 %.....	4	
5. Adjustments of Tax for Prior Period.....	5	
6. .42 per month.....	6	
7. 50%.....	7	
8. Total (Include Interest and Penalty If Due).....	8	

Tax Year 2022

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, 2022**

MAKE CHECK OR MONEY ORDER TO:
VILLAGE OF WEST JEFFERSON INCOME TAX
28 EAST MAIN STREET
WEST JEFFERSON OH 43162-0048

Voice 614-879-9757 Ext Fax 614-879-5338

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 1.000 %.....	4	
5. Adjustments of Tax for Prior Period.....	5	
6. .42 per month.....	6	
7. 50%.....	7	
8. Total (Include Interest and Penalty If Due).....	8	

Tax Year 2022

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, 2022**

MAKE CHECK OR MONEY ORDER TO:
VILLAGE OF WEST JEFFERSON INCOME TAX
28 EAST MAIN STREET
WEST JEFFERSON OH 43162-0048

Voice 614-879-9757 Ext Fax 614-879-5338

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 1.000 %.....	4	
5. Adjustments of Tax for Prior Period.....	5	
6. .42 per month.....	6	
7. 50%.....	7	
8. Total (Include Interest and Penalty If Due).....	8	

Tax Year 2022

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, 2022**

MAKE CHECK OR MONEY ORDER TO:
VILLAGE OF WEST JEFFERSON INCOME TAX
28 EAST MAIN STREET
WEST JEFFERSON OH 43162-0048

Voice 614-879-9757 Ext Fax 614-879-5338

Name
And
Address

Period Ending JUNE

TAX ID



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 1.000 %.....	4	
5. Adjustments of Tax for Prior Period.....	5	
6. .42 per month.....	6	
7. 50%.....	7	
8. Total (Include Interest and Penalty If Due).....	8	

Tax Year 2022

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, 2022**

MAKE CHECK OR MONEY ORDER TO:
VILLAGE OF WEST JEFFERSON INCOME TAX
28 EAST MAIN STREET
WEST JEFFERSON OH 43162-0048

Voice 614-879-9757 Ext Fax 614-879-5338

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 1.000 %.....	4	
5. Adjustments of Tax for Prior Period.....	5	
6. .42 per month.....	6	
7. 50%.....	7	
8. Total (Include Interest and Penalty If Due).....	8	

Tax Year 2022

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, 2022**

MAKE CHECK OR MONEY ORDER TO:
VILLAGE OF WEST JEFFERSON INCOME TAX
28 EAST MAIN STREET
WEST JEFFERSON OH 43162-0048

Voice 614-879-9757 Ext Fax 614-879-5338

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 1.000 %.....	4	
5. Adjustments of Tax for Prior Period.....	5	
6. .42 per month.....	6	
7. 50%.....	7	
8. Total (Include Interest and Penalty If Due).....	8	

Tax Year 2022

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, 2022**

MAKE CHECK OR MONEY ORDER TO:
VILLAGE OF WEST JEFFERSON INCOME TAX
28 EAST MAIN STREET
WEST JEFFERSON OH 43162-0048

Voice 614-879-9757 Ext Fax 614-879-5338

Name

And

Address

Period Ending SEPTEMBER

TAX ID



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 1.000 %.....	4	
5. Adjustments of Tax for Prior Period.....	5	
6. .42 per month.....	6	
7. 50%.....	7	
8. Total (Include Interest and Penalty if Due).....	8	

Tax Year 2022

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, 2022

MAKE CHECK OR MONEY ORDER TO: VILLAGE OF WEST JEFFERSON INCOME TAX 28 EAST MAIN STREET WEST JEFFERSON OH 43162-0048

Voice 614-879-9757 Ext Fax 614-879-5338

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 1.000 %.....	4	
5. Adjustments of Tax for Prior Period.....	5	
6. .42 per month.....	6	
7. 50%.....	7	
8. Total (Include Interest and Penalty if Due).....	8	

Tax Year 2022

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, 2022

MAKE CHECK OR MONEY ORDER TO: VILLAGE OF WEST JEFFERSON INCOME TAX 28 EAST MAIN STREET WEST JEFFERSON OH 43162-0048

Voice 614-879-9757 Ext Fax 614-879-5338

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 1.000 %.....	4	
5. Adjustments of Tax for Prior Period.....	5	
6. .42 per month.....	6	
7. 50%.....	7	
8. Total (Include Interest and Penalty if Due).....	8	

Tax Year 2022

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, 2023

MAKE CHECK OR MONEY ORDER TO: VILLAGE OF WEST JEFFERSON INCOME TAX 28 EAST MAIN STREET WEST JEFFERSON OH 43162-0048

Voice 614-879-9757 Ext Fax 614-879-5338

Name

And

Address

Period Ending DECEMBER

TAX ID