1. Number of Taxable Employees	[1]			
Total Salaries, Wages, Commissions and other Compensation paid all employees.			Tax Year  I hereby certify that the information in and in any schedules or exhibits	and statements contained her
3. Less payroll not subject to tax			,	
c. 2000 payron not obspect to tax.			Signed	
4. Taxable Earnings (line 2 minus 3)			Title	Date
5. Actual Tax Withheld at 1.350 %			Phone #	
. Adjustments of Tax for Prior Period	6		THIS RETURN MUST	
7. Interest Rate: .833 Per Month	7		OR BEFORE FEBRUAR	RY 28, 2024
8. Penalty: 50% of Tax Withheld.	8		MAKE CHECK OR N	MONEY ORDER TO:
. Total (Include Interest and Penalty if Due)			MT. ORAB INCOM	•
			211 South	
Name			P.O Bo	
			Mt. Orab, C	OH 45154
And			Voice 937-444-2945	Fax 937-444-9241
Address			Period Ending JANUARY	
			<u> </u>	
		T.	AX ID	
			AX ID  DEPARTMENT PROMPTLY OF ANY CHANGE IN OWN	ERSHIP OR NAME AND ADDRESS.
				ERSHIP OR NAME AND ADDRESS.
		NOTIFY INCOME TAX		ERSHIP OR NAME AND ADDRESS.
	DYER'S WITHHOLI	NOTIFY INCOME TAX		ERSHIP OR NAME AND ADDRESS.
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Number of Taxable Employees.     Total Salaries, Wages, Commissions and other Compensation paid all employees.     Less payroll not subject to tax.      Taxable Earnings (line 2 minus 3).     Actual Tax Withheld at 1.350 %.	1 2 3 4 5	NOTIFY INCOME TAX	Tax Year  I hereby certify that the information in and in any schedules or exhibits  Signed  Title  Phone #	2024  and statements contained he attached are true and correct  Date
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Period Ending FEBRUARY

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

TAX ID

in and in any schedules or exhibits attached are true.  3 Less payroll not subject to tax.  3 Signed  Title Date Phone #  THIS RETURN MUST BE FILED OR BEFORE APRIL 30, 2024  MAKE CHECK OR MONEY OR MIT. ORAB INCOME TAX BURE. 211 South High St. P.O Box 268 Mt. Orab, OH 45154  Voice 937-444-2945 Fax 93  Address  Period Ending MARCH TAX ID	nmissions and other //ees		Tax Year 2024 I hereby certify that the information and statements contains
3. Less payroll not subject to tax.  4. Taxable Earnings (line 2 minus 3).  5. Actual Tax Withheld at 1.350 %.  6. Adjustments of Tax for Prior Period.  7. Interest Rate: 833 Per Month.  9. Total (Include Interest and Penalty if Due).  7. Name  And  Address  Period Ending MARCH  TAX ID  NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND CARD TO MAKE AND CRANGE IN OWNERSHIP OR NAME AND CARD TO MAKE AND CRANGE IN OWNERSHIP OR NAME AND CARD TO MAKE AND CRANGE IN OWNERSHIP OR NAME AND CARD TO MAKE AND CRANGE IN OWNERSHIP OR NAME AND CARD TO MAKE CHECK OR MONEY OR MIT. OR BEFORE APRIL 30, 2024  MAKE CHECK OR MONEY OR MIT. OR BINCOME TAX BURE.  211 South High St.  P.O Box 268  Mt. Orab, OH 45154  Voice 937-444-2945  Fax 93	inus 3)		
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5. Actual Tax Withheld at 1.350 %	50 %		Signed
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Address  Period Ending MARCH  TAX ID  NOTIFY INCOME TAX BURE.  211 South High St. P.O Box 268 Mt. Orab, OH 45154  Voice 937-444-2945 Fax 93  Period Ending MARCH  TAX ID	nth		OR BEFORE APRIL 30, 2024
Address  Period Ending MARCH  TAX ID  NOTIFY INCOME TAX DURE.  MT. ORAB INCOME TAX BURE.  211 South High St. P.O Box 268 Mt. Orab, OH 45154  Voice 937-444-2945 Fax 93  Period Ending MARCH  TAX ID  NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AFTER TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AFTER TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AFTER TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AFTER TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AFTER TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AFTER TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AFTER TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AFTER TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AFTER TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AFTER TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AFTER TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AFTER TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AFTER TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AFTER TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AFTER TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AFTER TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AFTER TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AFTER TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AFTER TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AFTER TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AFTER TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AFTER TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AFTER TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AFTER TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AFTER TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP	eld		MAKE CHECK OR MONEY ORDER 1
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Name P.O Box 268 Mt. Orab, OH 45154  Voice 937-444-2945 Fax 93  Address  Period Ending MARCH TAX ID  NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS TO THE PROMPTLY OF ANY CHANGE IN OWNERSHIP OWNERSHI			
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Address  Period Ending MARCH  TAX ID  NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AR			Voice 937-444-2945 Fax 937-444-9
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NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AN			Period Ending MARCH
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FORM W1 1124 FMPI OVER'S WITHHOLDING - MONTHLY			
	EMPLOYER'S W	HHOLDING - MONTHLY	
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7. Total Salarian Wagner Commissions and other	omissions and other		
Compensation paid all employees     I hereby certify that the information and statements	/ees2		I hereby certify that the information and statements contained in and in any schedules or exhibits attached are true and contained in any schedules or exhibits attached are true and contained in any schedules.
3. Less payroll not subject to tax			·
	ax		Signed
. Taxable Earnings (line 2 minus 3)			Title Date
	3 inus 3)		
	3 inus 3)		Phone #
C. Interest Rate: .833 Per Month	3 inus 3)		
N Develor 500/ of Tev Withhold	3 inus 3)		Phone #THIS RETURN MUST BE FILED ON
B. Penalty: 50% of Tax Withheld	3 inus 3). 4 50 %. 5 r Period. 6 nth. 7 eld. 8		Phone #  THIS RETURN MUST BE FILED ON OR BEFORE MAY 31, 2024
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Total (Include Interest and Penalty if Due)	3 inus 3). 4 50 %. 5 r Period. 6 nth. 7 eld. 8		Phone #  THIS RETURN MUST BE FILED ON OR BEFORE MAY 31, 2024  MAKE CHECK OR MONEY ORDER TO MIT. ORAB INCOME TAX BUREAU
Total (Include Interest and Penalty if Due)	3 inus 3). 4 50 %. 5 r Period. 6 nth. 7 eld. 8		Phone #  THIS RETURN MUST BE FILED ON OR BEFORE MAY 31, 2024  MAKE CHECK OR MONEY ORDER TO MIT. ORAB INCOME TAX BUREAU 211 South High St.
Total (Include Interest and Penalty if Due)	3 inus 3). 4 50 %. 5 r Period. 6 nth. 7 eld. 8		Phone #  THIS RETURN MUST BE FILED ON  OR BEFORE MAY 31, 2024  MAKE CHECK OR MONEY ORDER TO SHEED THE SHEED TO SHEED THE SHEED
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Period Ending APRIL

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

TAX ID

4. November of Taxable Carabayas	11		7	
Number of Taxable Employees			Tax Year	
Compensation paid all employees			I hereby certify that the informatio in and in any schedules or exhibit:	
3. Less payroll not subject to tax			Signed	
4. Taxable Earnings (line 2 minus 3)			Title	
5. Actual Tax Withheld at 1.350 %	5		Phone #	
6. Adjustments of Tax for Prior Period			THIS RETURN MUST	BE FILED ON
7. Interest Rate: .833 Per Month	7		OR BEFORE JUNE	30, 2024
8. Penalty: 50% of Tax Withheld				MONEY ORDER TO:
9. Total (Include Interest and Penalty if Due)	9		MT. ORAB INCOM	
		·	211 South	
Name			P.O Bo	
Name			Mt. Orab,	
And			Voice 937-444-2945	Fax 937-444-9241
Address			Period Ending MAY	
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			.X ID EPARTMENT PROMPTLY OF ANY CHANGE IN OWI	NERSHIP OR NAME AND ADDRESS.
				NERSHIP OR NAME AND ADDRESS.
FORM W1 1124 EMP	PLOYER'S WITHHOLI	NOTIFY INCOME TAX DI		NERSHIP OR NAME AND ADDRESS.
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1. Number of Taxable Employees	1	NOTIFY INCOME TAX DI	EPARTMENT PROMPTLY OF ANY CHANGE IN OWI	<b>2024</b> n and statements contained he
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Period Ending JUNE

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

TAX ID

1. Number of Taxable Employees	1			
Total Salaries, Wages, Commissions and other Compensation paid all employees			Tax Yea I hereby certify that the informati in and in any schedules or exhib	on and statements contained her
3. Less payroll not subject to tax			Signed	
4. Taxable Earnings (line 2 minus 3)				Date
5. Actual Tax Withheld at 1.350 %			Phone #	
6. Adjustments of Tax for Prior Period			THIS RETURN MUS	
7. Interest Rate: .833 Per Month	7		OR BEFORE AUGUS	
8. Penalty: 50% of Tax Withheld	8			MONEY ORDER TO:
9. Total (Include Interest and Penalty if Due)	9			
	-	•		ME TAX BUREAU th High St.
Name				Box 268
Name			_	OH 45154
And			Voice 937-444-2945	Fax 937-444-9241
Address			Period Ending JULY	
		T/	AX ID	
			DEPARTMENT PROMPTLY OF ANY CHANGE IN O	
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FORM W1 1124 EMPLOYER'S	S WITHHOLD	DING - MONTHLY		
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Number of Taxable Employees	1	DING - MONTHLY	Tax Yea	
Number of Taxable Employees.     Total Salaries, Wages, Commissions and other     Compensation paid all employees.	1 2	DING - MONTHLY	Tax Yea I hereby certify that the informati in and in any schedules or exhib	on and statements contained her
Number of Taxable Employees	2	DING - MONTHLY	I hereby certify that the informati in and in any schedules or exhib	on and statements contained her its attached are true and correct.
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1. Number of Taxable Employees. 2. Total Salaries, Wages, Commissions and other Compensation paid all employees. 3. Less payroll not subject to tax. 4. Taxable Earnings (line 2 minus 3). 5. Actual Tax Withheld at 1.350 %.	2 3 4 5	DING - MONTHLY	I hereby certify that the informati in and in any schedules or exhib  Signed Title Phone #	on and statements contained her its attached are true and correct.  Date
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Period Ending AUGUST

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

TAX ID

Number of Taxable Employees				
Total Salaries, Wages, Commissions and other Compensation paid all employees			I hereby certify that the informatio in and in any schedules or exhibit	n and statements contained her
3. Less payroll not subject to tax			Signed	
4. Taxable Earnings (line 2 minus 3)			Title	Date
5. Actual Tax Withheld at 1.350 %			Phone #	
6. Adjustments of Tax for Prior Period	6		THIS RETURN MUST	
7. Interest Rate: .833 Per Month	/		OR BEFORE OCTOBE	R 31, 2024
8. Penalty: 50% of Tax Withheld			MAKE CHECK OR I	MONEY ORDER TO:
9. Total (Include Interest and Penalty If Due)			MT. ORAB INCOM	ME TAX BUREAU
			211 South	
Name			P.O Bo	
			Mt. Orab,	OH 45154
And			Voice 937-444-2945	Fax 937-444-9241
Address			Period Ending SEPTEME	BER
		Т	TAXID	
			TAX ID	NIEDSHID OD NAME AND ADDRESS
			TAX ID X DEPARTMENT PROMPTLY OF ANY CHANGE IN OW	NERSHIP OR NAME AND ADDRESS.
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FORM W1 1124 EMPL	OYER'S WITHHOLI	NOTIFY INCOME TAX		NERSHIP OR NAME AND ADDRESS.
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Number of Taxable Employees	1	NOTIFY INCOME TAX	Tax Year  I hereby certify that the informatio in and in any schedules or exhibit	<b>2024</b> n and statements contained he sattached are true and correct.
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1. Number of Taxable Employees. 2. Total Salaries, Wages, Commissions and other Compensation paid all employees. 3. Less payroll not subject to tax. 4. Taxable Earnings (line 2 minus 3).	1 2 3 4	NOTIFY INCOME TAX	Tax Year  I hereby certify that the informatio in and in any schedules or exhibit  Signed Title	<b>2024</b> n and statements contained he s attached are true and correct.
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Period Ending OCTOBER

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

TAX ID

1. Number of Taxable Employees	T 1/ 2004
Total Salaries, Wages, Commissions and other     Compensation paid all employees	Tax Year 2024  I hereby certify that the information and statements contained he in and in any schedules or exhibits attached are true and correct
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4. Taxable Earnings (line 2 minus 3)	
5. Actual Tax Withheld at 1.350 %	
6. Adjustments of Tax for Prior Period	THIS RETURN MUST BE FILED ON
7. Interest Rate: .833 Per Month	OR BEFORE DECEMBER 31, 2024
8. Penalty: 50% of Tax Withheld	MAKE CHECK OD MONEY ODDED TO:
9. Total (Include Interest and Penalty if Due)	MT. ORAB INCOME TAX BUREAU
Name And	211 South High St. P.O Box 268 Mt. Orab, OH 45154 Voice 937-444-2945 Fax 937-444-9241
Address	Period Ending NOVEMBER
	T Chou Ending NOVEMBER
	TAX ID
	TAX ID  NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.
FORM W1 1124 EMPLOYER'S W	
	NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.  WITHHOLDING - MONTHLY
Number of Taxable Employees	NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.  VITHHOLDING - MONTHLY  Tax Year 2024  I hereby certify that the information and statements contained he
1. Number of Taxable Employees	VITHHOLDING - MONTHLY  Tax Year 2024  I hereby certify that the information and statements contained he in and in any schedules or exhibits attached are true and correct
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Period Ending DECEMBER

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

TAX ID