

CITY OF ONTARIO, OHIO

EMPLOYER'S QUARTERLY RETURN OF TAX WITHHELD

Income Tax Rate:	DOLLARS	CENTS	I hereby certify that the information and statements contained herein are true and correct.  (Signed) _____  (Title) _____ Date _____  (Phone) _____
1. Taxable Earnings paid all Employees subject to Ontario, Ohio City Income Tax..... \$			
2. Actual Tax Withheld this Quarter for City Income Tax..... \$			
3. Resident/Courtesy Withholding Tax..... \$			
4. Interest ..... \$			
5. Penalty..... \$			
6. TOTAL ..... \$			

If no wages were paid this month, mark "NONE" and return this form with explanation.

Federal ID No.

NAME & ADDRESS

YEAR

1ST QUARTER

JAN, FEB, MAR

DUE ON OR BEFORE  
APRIL 30

MAIL TO:

CITY OF ONTARIO, OHIO  
INCOME TAX DEPT.  
555 STUMBO ROAD  
ONTARIO, OHIO 44906

THIS RETURN MUST BE FILED ON OR BEFORE THE DUE DATE SHOWN BELOW  
MAKE CHECK OR MONEY ORDER PAYABLE TO  
**CITY OF ONTARIO, OHIO - INCOME TAX**

CHECK MUST ACCOMPANY FORM AND BE RECEIVED BY DUE DATE TO AVOID PENALTY.

CITY OF ONTARIO, OHIO

EMPLOYER'S QUARTERLY RETURN OF TAX WITHHELD

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2. Actual Tax Withheld this Quarter for City Income Tax..... \$			
3. Resident/Courtesy Withholding Tax..... \$			
4. Interest ..... \$			
5. Penalty..... \$			
6. TOTAL ..... \$			

If no wages were paid this month, mark "NONE" and return this form with explanation.

Federal ID No.

NAME & ADDRESS

YEAR

2ND QUARTER

APR, MAY, JUN

DUE ON OR BEFORE  
JULY 31

MAIL TO:

CITY OF ONTARIO, OHIO  
INCOME TAX DEPT.  
555 STUMBO ROAD  
ONTARIO, OHIO 44906

THIS RETURN MUST BE FILED ON OR BEFORE THE DUE DATE SHOWN BELOW  
MAKE CHECK OR MONEY ORDER PAYABLE TO  
**CITY OF ONTARIO, OHIO - INCOME TAX**

CHECK MUST ACCOMPANY FORM AND BE RECEIVED BY DUE DATE TO AVOID PENALTY.

CITY OF ONTARIO, OHIO

EMPLOYER'S QUARTERLY RETURN OF TAX WITHHELD

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3. Resident/Courtesy Withholding Tax..... \$			
4. Interest ..... \$			
5. Penalty..... \$			
6. TOTAL ..... \$			

If no wages were paid this month, mark "NONE" and return this form with explanation.

Federal ID No.

NAME & ADDRESS

YEAR

3RD QUARTER

JUL, AUG, SEP

DUE ON OR BEFORE  
OCTOBER 31

MAIL TO:

CITY OF ONTARIO, OHIO  
INCOME TAX DEPT.  
555 STUMBO ROAD  
ONTARIO, OHIO 44906

THIS RETURN MUST BE FILED ON OR BEFORE THE DUE DATE SHOWN BELOW  
MAKE CHECK OR MONEY ORDER PAYABLE TO  
**CITY OF ONTARIO, OHIO - INCOME TAX**

CHECK MUST ACCOMPANY FORM AND BE RECEIVED BY DUE DATE TO AVOID PENALTY.

CITY OF ONTARIO, OHIO

EMPLOYER'S QUARTERLY RETURN OF TAX WITHHELD

Income Tax Rate:	DOLLARS	CENTS
1. Taxable Earnings paid all Employees subject to Ontario, Ohio City Income Tax..... \$		
2. Actual Tax Withheld this Quarter for City Income Tax..... \$		
3. Resident/Courtesy Withholding Tax..... \$		
4. Interest ..... \$		
5. Penalty..... \$		
6. TOTAL ..... \$		

If no wages were paid this month, mark "NONE" and return this form with explanation.

Federal ID No.  
Name & Address

YEAR  
4TH QUARTER  
OCT, NOV, DEC  
DUE ON OR BEFORE  
JANUARY 31

MAIL TO: CITY OF ONTARIO, OHIO  
INCOME TAX DEPT.  
555 STUMBO ROAD  
ONTARIO, OHIO 44906

THIS RETURN MUST BE FILED  
ON OR BEFORE THE DUE DATE SHOWN BELOW  
MAKE CHECK OR MONEY ORDER PAYABLE TO  
CITY OF ONTARIO, OHIO - INCOME TAX

I hereby certify that the information and statements  
contained herein are true and correct.

(Signed) \_\_\_\_\_  
(Title) \_\_\_\_\_ Date \_\_\_\_\_  
(Phone) \_\_\_\_\_

CHECK MUST ACCOMPANY FORM AND BE  
RECEIVED BY DUE DATE TO AVOID PENALTY.

Notify Income Tax Division promptly of any change in ownership or name and address shown above.