



Ohio Department of TAXATION

Please do not use staples.



08040200

UUT 1 Long Rev. 10/07 Ohio Universal UseTax Return

Account number

Reporting period

to

County Name	County Number	County Tax Rate	Taxable Purchases*		Tax Liability*
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Brown	08		<input type="checkbox"/>		<input type="checkbox"/>
Butler	09		<input type="checkbox"/>		<input type="checkbox"/>
Carroll	10		<input type="checkbox"/>		<input type="checkbox"/>
Champaign	11		<input type="checkbox"/>		<input type="checkbox"/>
Clark	12		<input type="checkbox"/>		<input type="checkbox"/>
Clermont	13		<input type="checkbox"/>		<input type="checkbox"/>
Clinton	14		<input type="checkbox"/>		<input type="checkbox"/>
Columbiana	15		<input type="checkbox"/>		<input type="checkbox"/>
Coshocton	16		<input type="checkbox"/>		<input type="checkbox"/>
Crawford	17		<input type="checkbox"/>		<input type="checkbox"/>
Cuyahoga	18		<input type="checkbox"/>		<input type="checkbox"/>
Darke	19		<input type="checkbox"/>		<input type="checkbox"/>
Defiance	20		<input type="checkbox"/>		<input type="checkbox"/>
Delaware	21		<input type="checkbox"/>		<input type="checkbox"/>
Delaware (COTA)	96		<input type="checkbox"/>		<input type="checkbox"/>
Erie	22		<input type="checkbox"/>		<input type="checkbox"/>
Fairfield	23		<input type="checkbox"/>		<input type="checkbox"/>
Fairfield (COTA)	93		<input type="checkbox"/>		<input type="checkbox"/>
Fayette	24		<input type="checkbox"/>		<input type="checkbox"/>
Franklin	25		<input type="checkbox"/>		<input type="checkbox"/>
Fulton	26		<input type="checkbox"/>		<input type="checkbox"/>
Gallia	27		<input type="checkbox"/>		<input type="checkbox"/>
Geauga	28		<input type="checkbox"/>		<input type="checkbox"/>
Greene	29		<input type="checkbox"/>		<input type="checkbox"/>
Guernsey	30		<input type="checkbox"/>		<input type="checkbox"/>
Hamilton	31		<input type="checkbox"/>		<input type="checkbox"/>
Hancock	32		<input type="checkbox"/>		<input type="checkbox"/>
Hardin	33		<input type="checkbox"/>		<input type="checkbox"/>
Harrison	34		<input type="checkbox"/>		<input type="checkbox"/>
Henry	35		<input type="checkbox"/>		<input type="checkbox"/>
Highland	36		<input type="checkbox"/>		<input type="checkbox"/>
Hocking	37		<input type="checkbox"/>		<input type="checkbox"/>
Holmes	38		<input type="checkbox"/>		<input type="checkbox"/>

*If this amount is a negative, please shade in the negative sign "-" in the box provided.

Page 2 subtotal

*Enter subtotal on page 4 of this return.



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08040300

UUT 1 Long Rev. 10/07 Ohio Universal UseTax Return

Account number

Reporting period

to

County Name	County Number	County Tax Rate	Taxable Purchases*		Tax Liability*
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Huron	39		<input type="checkbox"/>		<input type="checkbox"/>
Jackson	40		<input type="checkbox"/>		<input type="checkbox"/>
Jefferson	41		<input type="checkbox"/>		<input type="checkbox"/>
Knox	42		<input type="checkbox"/>		<input type="checkbox"/>
Lake	43		<input type="checkbox"/>		<input type="checkbox"/>
Lawrence	44		<input type="checkbox"/>		<input type="checkbox"/>
Licking	45		<input type="checkbox"/>		<input type="checkbox"/>
Licking (COTA)	94		<input type="checkbox"/>		<input type="checkbox"/>
Logan	46		<input type="checkbox"/>		<input type="checkbox"/>
Lorain	47		<input type="checkbox"/>		<input type="checkbox"/>
Lucas	48		<input type="checkbox"/>		<input type="checkbox"/>
Madison	49		<input type="checkbox"/>		<input type="checkbox"/>
Mahoning	50		<input type="checkbox"/>		<input type="checkbox"/>
Marion	51		<input type="checkbox"/>		<input type="checkbox"/>
Medina	52		<input type="checkbox"/>		<input type="checkbox"/>
Meigs	53		<input type="checkbox"/>		<input type="checkbox"/>
Mercer	54		<input type="checkbox"/>		<input type="checkbox"/>
Miami	55		<input type="checkbox"/>		<input type="checkbox"/>
Monroe	56		<input type="checkbox"/>		<input type="checkbox"/>
Montgomery	57		<input type="checkbox"/>		<input type="checkbox"/>
Morgan	58		<input type="checkbox"/>		<input type="checkbox"/>
Morrow	59		<input type="checkbox"/>		<input type="checkbox"/>
Muskingum	60		<input type="checkbox"/>		<input type="checkbox"/>
Noble	61		<input type="checkbox"/>		<input type="checkbox"/>
Ottawa	62		<input type="checkbox"/>		<input type="checkbox"/>
Paulding	63		<input type="checkbox"/>		<input type="checkbox"/>
Perry	64		<input type="checkbox"/>		<input type="checkbox"/>
Pickaway	65		<input type="checkbox"/>		<input type="checkbox"/>
Pike	66		<input type="checkbox"/>		<input type="checkbox"/>
Portage	67		<input type="checkbox"/>		<input type="checkbox"/>
Preble	68		<input type="checkbox"/>		<input type="checkbox"/>
Putnam	69		<input type="checkbox"/>		<input type="checkbox"/>
Richland	70		<input type="checkbox"/>		<input type="checkbox"/>

*If this amount is a negative, please shade in the negative sign "-" in the box provided.

Page 3 subtotal

*Enter subtotal on page 4 of this return.

