

**RETURN PART 1 - KEEP PART 2 FOR YOUR RECORDS
EMPLOYER'S RETURN OF TAX WITHHELD**

VILLAGE OF UNION CITY W-1
VILLAGE INCOME TAX RATE:

		DOLLARS	CENTS
1. Taxable Earnings paid all Employees subject to Union City Income Tax	\$ _____		
2. Actual Tax Withheld in period for Village Income Tax	\$ _____		
3. Adjustment of Tax for prior period	_____		
4. Interest: _____	_____		
5. Penalty: _____	_____		
6. Total	\$ _____		

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

(Signed) _____

(Official Title) _____ Date

THIS RETURN MUST BE FILED
ON OR BEFORE THE DUE DATE SHOWN BELOW.
MAKE CHECK OR MONEY ORDER PAYABLE TO
VILLAGE OF UNION CITY

MAIL TO: VILLAGE OF UNION CITY DEPT. OF TAXATION
419 E. ELM STREET
UNION CITY, OHIO 45390

FOR MONTH OF _____

DUE ON OR BEFORE _____

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

FEDERAL I.D. # _____
If receipt is desired, return Taxpayer's Copy of this form and
enclose self-addressed, stamped envelope.