

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 1.750 %.	4		
5. Adjustments of Tax for Prior Period.	5		
6. Interest 0.833% per month late.	6		
7. Late Pay Penalty 50% of tax due.	7		
8. Total (Include Interest and Penalty if Due).	8		

Tax Year 2025

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
the 15th of the following month**

MAKE CHECK OR MONEY ORDER TO:

**VILLAGE OF FAIRFAX TAX DEPARTMENT
5903 HAWTHORNE AVE
CINCINNATI OH 45227**

Voice 513-527-6506

Fax 513-561-5748

Name

And

Address

Quarter Ending:

TAX ID / FEIN:

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