



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 0.000 %	4	
5. Adjustments of Tax for Prior Period	5	
6. 0.583% per month	6	
7. 50%	7	
8. Total (Include Interest and Penalty if Due)	8	

Tax Year 2023

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 APRIL 30, 2023

MAKE CHECK OR MONEY ORDER TO:

VILLAGE OF FAIRFAX TAX DEPARTMENT
5903 HAWTHORNE AVE
CINCINNATI OH 45227

Voice 513-527-6506 Ext Fax 513-561-5748

Name

And

Address

Period Ending JAN-FEB-MAR

TAX ID

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



1. Number of Taxable Employees	1	
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8. Total (Include Interest and Penalty if Due)	8	

Tax Year 2023

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 JULY 31, 2023

MAKE CHECK OR MONEY ORDER TO:

VILLAGE OF FAIRFAX TAX DEPARTMENT
5903 HAWTHORNE AVE
CINCINNATI OH 45227

Voice 513-527-6506 Ext Fax 513-561-5748

Name

And

Address

Period Ending APR-MAY-JUN

TAX ID

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



1. Number of Taxable Employees	1	
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Tax Year 2023

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 OCTOBER 31, 2023

MAKE CHECK OR MONEY ORDER TO:

VILLAGE OF FAIRFAX TAX DEPARTMENT
5903 HAWTHORNE AVE
CINCINNATI OH 45227

Voice 513-527-6506 Ext Fax 513-561-5748

Name

And

Address

Period Ending JUL-AUG-SEP

TAX ID

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