FORM W1 1500	75750 EMPLOYER	R'S WITHHOLDING - MONTHLY	00001 
	Employees		Tax Year 2023
Total Salaries, Wag     naid all employees	ges, Commissions and other Compensati	on 2	I hereby certify that the information and statements contained here
para an empreyees		2	in and in any schedules or exhibits attached are true and correct.
0 T 11 F 1	( )		Signed
	from line 2)		Title Date
	d at 1.500 %		Phone # THIS RETURN MUST BE FILED ON
6. 1.5%		. [6]	OR BEFORE FEBRUARY 15, 2023
7. 10%		. [/]	MAKE CHECK OR MONEY ORDER TO:
8. Total (Include Inter-	est and Penalty if Due)	[8]	PLAIN CITY INCOME TAX DEPARTMENT
			800 VILLAGE BLVD
Name			P.O. Box 167
۸ س ما			PLAIN CITY OH 43064
And			Voice 614-873-3527 Ext 104 Fax 614-873-9970
Address			Period Ending JANUARY
71441000		_	
		17	AX ID
é		NOTIFY INCOME TAX	DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.
FORM W1 1500	75751 EMPLOYE	R'S WITHHOLDING - MONTHLY	00002
	Employees	11	00002
2. Total Salaries, Wa	ges, Commissions and other Compensati	on	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
3. Taxable Earnings (	(from line 2)	3	
	ld at 1.500 %		Phone #
5. Adjustments of Tax	x for Prior Period	5	THIS RETURN MUST BE FILED ON
6. 1.5%		[6]	OR BEFORE MARCH 15, 2023
7. 10%		/	MAKE CHECK OR MONEY ORDER TO:
8. Total (Include Inter	est and Penalty if Due)		PLAIN CITY INCOME TAX DEPARTMENT
			800 VILLAGE BLVD
Name			P.O. Box 167 PLAIN CITY OH 43064
And			Voice 614-873-3527 Ext 104 Fax 614-873-9970
			VOIGO OTTOTO COLT EM TOT TAN OTTOTO COTO
Address			Period Ending FEBRUARY
		т.	AX IE
			DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.
		NOTH THOOME DA	
FORM W1 1500	75752 EMPLOYE	R'S WITHHOLDING - MONTHLY	00003
	e Employees		Tax Year 2023
	ges, Commissions and other Compensati		I hereby certify that the information and statements contained here
paid all employees			in and in any schedules or exhibits attached are true and correct.
			Signed
	(from line 2)		Title Date
	ld at 1.500 %		Phone #
5. Adjustments of Tax	x for Prior Period		THIS RETURN MUST BE FILED ON OR BEFORE APRIL 15, 2023
7. 10%		7	
8. Total (Include Inter	rest and Penalty if Due)	8	MAKE CHECK OR MONEY ORDER TO:
- vitic	read 650		PLAIN CITY INCOME TAX DEPARTMENT  800 VILLAGE BLVD
Name			P.O. Box 167
			PLAIN CITY OH 43064
And			Voice 614-873-3527 Ext 104 Fax 614-873-9970

Address

Period Ending MARCH

TAX ID

FORM W1 1500 75753 EMPLOYER'S	WITHHOLDING - MONTHLY	00004
1. Number of Taxable Employees	1	Tax Year 2023
Total Salaries, Wages, Commissions and other Compensation paid all employees.	2	I hereby certify that the information and statements contained here
		in and in any schedules or exhibits attached are true and correct.
2. Tayabla Farainga (from line 2)		Signed Date
Taxable Earnings (from line 2)		Phone #
5. Adjustments of Tax for Prior Period.	5	THIS RETURN MUST BE FILED ON
6. 1.5%.	6	OR BEFORE MAY 15, 2023
7. 10%	/	MAKE CHECK OR MONEY ORDER TO:
8. Total (Include Interest and Penalty if Due)	8	PLAIN CITY INCOME TAX DEPARTMENT
		800 VILLAGE BLVD
Name		P.O. Box 167
And		PLAIN CITY OH 43064
Alla		Voice 614-873-3527 Ext 104 Fax 614-873-9970
Address		Period Ending APRIL
/ dui occ	_	2004 2004 6400 PC
		TAX ID
	NOTIFY INCOME TA	AX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.
FORM W1 1500 75754 EMPLOYER'S	WITHHOLDING - MONTHLY	00005
Number of Taxable Employees	1	
2. Total Salaries, Wages, Commissions and other Compensation		Tax Year 2023 I hereby certify that the information and statements contained here
paid all employees	2	in and in any schedules or exhibits attached are true and correct.
		Signed
3. Taxable Earnings (from line 2)	3	Title Date
4. Actual Tax Withheld at 1.500 %	4	Phone #
5. Adjustments of Tax for Prior Period	5	THIS RETURN MUST BE FILED ON
6. 1.5%	6	OR BEFORE JUNE 15, 2023
7. 10%	Ω	MAKE CHECK OR MONEY ORDER TO:
8. Total (Include Interest and Penalty if Due)	o .	PLAIN CITY INCOME TAX DEPARTMENT
		800 VILLAGE BLVD
Name		P.O. Box 167 PLAIN CITY OH 43064
And		Voice 614-873-3527 Ext 104 Fax 614-873-9970
7 1113		Voice 014-073-3327 Ext 104 1 ax 014-073-3370
Address		Period Ending MAY
		TAX ID
	NOTIFY INCOME IX	AX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.
FORM W1 1500 75755 EMPLOYER'S	S WITHHOLDING - MONTHLY	00006
1. Number of Taxable Employees	1	Tax Year 2023
2. Total Salaries, Wages, Commissions and other Compensation		I hereby certify that the information and statements contained here
paid all employees	2	in and in any schedules or exhibits attached are true and correct.
		Signed
3. Taxable Earnings (from line 2)	3	Title Date
4. Actual Tax Withheld at 1.500 %	4	Phone #
5. Adjustments of Tax for Prior Period	5	THIS RETURN MUST BE FILED ON
6. 1.5%	7	OR BEFORE JULY 15, 2023
7. 10%	8	MAKE CHECK OR MONEY ORDER TO:
o. Total (Illolude litterest and Felialty II Due)		PLAIN CITY INCOME TAX DEPARTMENT
Name		800 VILLAGE BLVD P.O. Box 167
Name		PLAIN CITY OH 43064
And		Voice 614-873-3527 Ext 104 Fax 614-873-9970
Address		Period Ending JUNE

Period Ending JUNE

FORM W1 1500 75756 E	MPLOYER'S WITHHOLDING - MONTHLY	
Number of Taxable Employees.     Total Salaries, Wages, Commissions and other Compaid all employees.	Compensation	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
3. Taxable Earnings (from line 2)	3	Title Date
4. Actual Tax Withheld at 1.500 %		Phone #
5. Adjustments of Tax for Prior Period		THIS RETURN MUST BE FILED ON
6. 1.5%	6	OR BEFORE AUGUST 15, 2023
7. 10%	[7]	MAKE CHECK OR MONEY ORDER TO:
8. Total (Include Interest and Penalty if Due)	8	PLAIN CITY INCOME TAX DEPARTMENT 800 VILLAGE BLVD
Name		P.O. Box 167 PLAIN CITY OH 43064
And		Voice 614-873-3527 Ext 104 Fax 614-873-9970
Address		Period Ending JULY
		TAX ID
	NOTIFY INCOM	ME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.
	MPLOYER'S WITHHOLDING - MONTHLY	00008
Number of Taxable Employees	Compensation	Tax Year 2023
paid all employees.		I hereby certify that the information and statements contained here in and in any schedules or exhibits attached are true and correct.
		Signed
3. Taxable Earnings (from line 2)		Title Date
4. Actual Tax Withheld at 1.500 %	4	Phone #
5. Adjustments of Tax for Prior Period		THIS RETURN MUST BE FILED ON
6. 1.5%	6	OR BEFORE SEPTEMBER 15, 2023
7. 10%		MAKE CHECK OR MONEY ORDER TO:
8. Total (Include Interest and Penalty if Due)	8	PLAIN CITY INCOME TAX DEPARTMENT
		800 VILLAGE BLVD
Name		P.O. Box 167
		PLAIN CITY OH 43064
And		Voice 614-873-3527 Ext 104 Fax 614-873-9970
Address		Period Ending AUGUST
8		TAX ID
	NOTIFY INCOL	ME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.
FORM W1 1500 75758 E	MPLOYER'S WITHHOLDING - MONTHLY	00009
Number of Taxable Employees		00009
Total Salaries, Wages, Commissions and other		Tax Year 2023
paid all employees	2	I hereby certify that the information and statements contained here in and in any schedules or exhibits attached are true and correct.
		End-indicated adjusted in \$100,000 (and indicated and indi
		Signed
3. Taxable Earnings (from line 2)		Title Date
4. Actual Tax Withheld at 1.500 %		Phone #
5. Adjustments of Tax for Prior Period		THIS RETURN MUST BE FILED ON
6. 1.5%		OR BEFORE OCTOBER 15, 2023
7. 10%		MAKE CHECK OR MONEY ORDER TO:
8. Total (Include Interest and Penalty if Due)		PLAIN CITY INCOME TAX DEPARTMENT
		800 VILLAGE BLVD
Name		P.O. Box 167
		PLAIN CITY OH 43064
And		Voice 614-873-3527 Ext 104 Fax 614-873-9970

Address

Period Ending SEPTEMBER

TAX ID

FORM W1 1500 75759 EMPLOYE	R'S WITHHOLDING - MONTHLY	00010
Number of Taxable Employees.     Total Salaries, Wages, Commissions and other Compensations and other Compensations and other Compensations and other Compensations and other Compensations.	on	Tax Year 2023 I hereby certify that the information and statements contained here
para di di improjecti.	2	in and in any schedules or exhibits attached are true and correct.  Signed
3. Taxable Earnings (from line 2)	3	
4. Actual Tax Withheld at 1.500 %		Phone #
5. Adjustments of Tax for Prior Period		THIS RETURN MUST BE FILED ON
6. 1.5%	6	OR BEFORE NOVEMBER 15, 2023
7. 10%	/	MAKE CHECK OR MONEY ORDER TO:
8. Total (Include Interest and Penalty if Due)	[8]	PLAIN CITY INCOME TAX DEPARTMENT
		800 VILLAGE BLVD
Name		P.O. Box 167
A		PLAIN CITY OH 43064
And		Voice 614-873-3527 Ext 104 Fax 614-873-9970
Address		Period Ending OCTOBER
	TA	AX ID
		DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.
	NOTH THROOME PART	SELECTION OF SELEC
	R'S WITHHOLDING - MONTHLY	00011 
1. Number of Taxable Employees.		Tax Year 2023
2. Total Salaries, Wages, Commissions and other Compensat paid all employees.	1 1	I hereby certify that the information and statements contained here
paid all onlylogodo.	2	in and in any schedules or exhibits attached are true and correct.
		Signed
3. Taxable Earnings (from line 2)		Title Date
4. Actual Tax Withheld at 1.500 %		Phone #
5. Adjustments of Tax for Prior Period		THIS RETURN MUST BE FILED ON
6. 1.5%		OR BEFORE DECEMBER 15, 2023
7. 10%		MAKE CHECK OR MONEY ORDER TO:
o. Total (illicitude litterest and Ferfalty ii Due)		PLAIN CITY INCOME TAX DEPARTMENT
N		800 VILLAGE BLVD
Name		P.O. Box 167 PLAIN CITY OH 43064
And		
7.110		Voice 614-873-3527 Ext 104 Fax 614-873-9970
Address		Period Ending NOVEMBER
	TA	AX ID
	NOTIFY INCOME TAX I	DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.
FORM W1 1500 75761 EMPLOYE	R'S WITHHOLDING - MONTHLY	00012
	T. I	00012
Number of Taxable Employees.     Total Salaries, Wages, Commissions and other Compensat	1992 — A — — — — — — — — — — — — — — — — —	Tax Year 2023
paid all employees.		I hereby certify that the information and statements contained here in and in any schedules or exhibits attached are true and correct.
		•
0.7		Signed
3. Taxable Earnings (from line 2).		Title Date
4. Actual Tax Withheld at 1.500 %		Phone # THIS RETURN MUST BE FILED ON
6. 1 50/.	6	<b></b>
6. 1.5%	7	OR BEFORE JANUARY 15, 2024
8. Total (Include Interest and Penalty if Due)	8	MAKE CHECK OR MONEY ORDER TO:
, , , , , , , , , , , , , , , , , , , ,		PLAIN CITY INCOME TAX DEPARTMENT
Nama		800 VILLAGE BLVD P.O. Box 167
Name		PLAIN CITY OH 43064
And		Voice 614-873-3527 Ext 104 Fax 614-873-9970
		70100 014 010 0021 EXC 104 1 1 dx 014-010-9910

Address

Period Ending DECEMBER

## Tax Year 2023

FORM W3 1500 75762 **EMPLOYER'S** WITHHOLDING RECONCILIATION

## PLAIN CITY INCOME TAX DEPARTMENT

800 VILLAGE BLVD P.O. Box 167 PLAIN CITY OH 43064



Voice 614-873-3527 Ext 104

Fax 614-873-9970

OUE DATE 02/28/2024	
---------------------	--

00001

1/1	21	ne

And

Address

FEDERAL ID NUMBER
NAME OF PERSON
COMPLETING FORM
LOCAL PHONE NUMBER
NUMBER OF EMPLOYEES LISTED

## **EMPLOYEE W2'S MUST ACCOMPANY THIS FORM**

## **INSTRUCTIONS**

- 1. Attach check payable to PLAIN CITY INCOME TAX DEPARTMENT, for difference if withholding exceeds remittance.
- 2. If remittance exceeds amount withheld, give explanation and request refund below.
- 3. Attach explanation if column 2 is used.

ENTER PAYROLL BY QUARTERLY OR MONTHLY TOTALS

Reconciliation instructions...

Period Payroll Subject to Tax Subject to Tax Due  January February	Tax Paid
	Per Your Records
February	
March/Qtr-1	
April	
May	
June/Qtr-2	
July	
August	
September/Qtr-3	
October	
November	
December/Qtr-4	
TOTALS	
TOTAL REMITTANCE MADE	
Employer - Explain any differences:  DIFFERENCE	