

|   |   |  |  |
|---|---|--|--|
| 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 2.500 %. ....   | 4 |  |  |
| 5. Adjustments of Tax for Prior Period. ....  | 5 |  |  |
| 6. Interest on Late Payment. ....   | 6 |  |  |
| 7. Penalty on Late Payment. ....  | 7 |  |  |
| 8. Total (Include Interest and Penalty if Due). ....                                  | 8 |  |  |

**Tax Year 2014**

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 FEBRUARY 20, 2014**

**MAKE CHECK OR MONEY ORDER TO:**  
 VILLAGE OF WALTON HILLS  
 7595 Walton Rd  
 Walton Hills OH 44146-5072

Voice 440-232-7800 Fax 440-232-4070

Name \_\_\_\_\_  
 And \_\_\_\_\_  
 Address \_\_\_\_\_

Period Ending JANUARY

TAX ID \_\_\_\_\_

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

**FORM W1 1222**

**EMPLOYER'S WITHHOLDING - MONTHLY**

|   |   |  |  |
|---|---|--|--|
| 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 2.500 %. ....   | 4 |  |  |
| 5. Adjustments of Tax for Prior Period. ....  | 5 |  |  |
| 6. Interest on Late Payment. ....   | 6 |  |  |
| 7. Penalty on Late Payment. ....  | 7 |  |  |
| 8. Total (Include Interest and Penalty if Due). ....                                  | 8 |  |  |

Name \_\_\_\_\_

And \_\_\_\_\_

Address \_\_\_\_\_

**Tax Year 2014**  
 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 MARCH 20, 2014**

**MAKE CHECK OR MONEY ORDER TO:**  
 VILLAGE OF WALTON HILLS  
 7595 Walton Rd  
 Walton Hills OH 44146-5072

Voice 440-232-7800 Fax 440-232-4070

Period Ending FEBRUARY

TAX ID \_\_\_\_\_

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

**FORM W1 1222**

**EMPLOYER'S WITHHOLDING - MONTHLY**

|   |   |  |  |
|---|---|--|--|
| 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 2.500 %. ....   | 4 |  |  |
| 5. Adjustments of Tax for Prior Period. ....  | 5 |  |  |
| 6. Interest on Late Payment. ....   | 6 |  |  |
| 7. Penalty on Late Payment. ....  | 7 |  |  |
| 8. Total (Include Interest and Penalty if Due). ....                                  | 8 |  |  |

Name \_\_\_\_\_

And \_\_\_\_\_

Address \_\_\_\_\_

**Tax Year 2014**  
 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 20, 2014**

**MAKE CHECK OR MONEY ORDER TO:**  
 VILLAGE OF WALTON HILLS  
 7595 Walton Rd  
 Walton Hills OH 44146-5072

Voice 440-232-7800 Fax 440-232-4070

Period Ending MARCH

TAX ID \_\_\_\_\_

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

**FORM W1 1222**

**EMPLOYER'S WITHHOLDING - MONTHLY**

|   |   |  |  |
|---|---|--|--|
| 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 2.500 %. ....   | 4 |  |  |
| 5. Adjustments of Tax for Prior Period. ....  | 5 |  |  |
| 6. Interest on Late Payment. ....   | 6 |  |  |
| 7. Penalty on Late Payment. ....  | 7 |  |  |
| 8. Total (Include Interest and Penalty if Due). ....                                  | 8 |  |  |

Name \_\_\_\_\_  
 And \_\_\_\_\_  
 Address \_\_\_\_\_

**Tax Year 2014**  
 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 MAY 20, 2014**

**MAKE CHECK OR MONEY ORDER TO:**  
 VILLAGE OF WALTON HILLS  
 7595 Walton Rd  
 Walton Hills OH 44146-5072

Voice 440-232-7800 Fax 440-232-4070

Period Ending **APRIL**

**TAX ID** \_\_\_\_\_

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

**FORM W1 1222**

**EMPLOYER'S WITHHOLDING - MONTHLY**

|   |   |  |  |
|---|---|--|--|
| 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 2.500 %. ....   | 4 |  |  |
| 5. Adjustments of Tax for Prior Period. ....  | 5 |  |  |
| 6. Interest on Late Payment. ....   | 6 |  |  |
| 7. Penalty on Late Payment. ....  | 7 |  |  |
| 8. Total (Include Interest and Penalty if Due). ....                                  | 8 |  |  |

Name \_\_\_\_\_  
 And \_\_\_\_\_  
 Address \_\_\_\_\_

**Tax Year 2014**  
 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 JUNE 20, 2014**

**MAKE CHECK OR MONEY ORDER TO:**  
 VILLAGE OF WALTON HILLS  
 7595 Walton Rd  
 Walton Hills OH 44146-5072

Voice 440-232-7800 Fax 440-232-4070

Period Ending **MAY**

**TAX ID** \_\_\_\_\_

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

|  |   |  |  |
|--|---|--|--|
| 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 2.500 %. . . . .   | 4 |  |  |
| 5. Adjustments of Tax for Prior Period. . . . .  | 5 |  |  |
| 6. Interest on Late Payment. . . . .   | 6 |  |  |
| 7. Penalty on Late Payment. . . . .  | 7 |  |  |
| 8. Total (Include Interest and Penalty if Due). . . . .                                  | 8 |  |  |

Name \_\_\_\_\_

And \_\_\_\_\_

Address \_\_\_\_\_

**Tax Year 2014**  
 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 20, 2014**

**MAKE CHECK OR MONEY ORDER TO:**  
 VILLAGE OF WALTON HILLS  
 7595 Walton Rd  
 Walton Hills OH 44146-5072

Voice 440-232-7800 Fax 440-232-4070

Period Ending JUNE

TAX ID \_\_\_\_\_

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

|  |   |  |  |
|--|---|--|--|
| 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 2.500 %. . . . .   | 4 |  |  |
| 5. Adjustments of Tax for Prior Period. . . . .  | 5 |  |  |
| 6. Interest on Late Payment. . . . .   | 6 |  |  |
| 7. Penalty on Late Payment. . . . .  | 7 |  |  |
| 8. Total (Include Interest and Penalty if Due). . . . .                                  | 8 |  |  |

Name \_\_\_\_\_

And \_\_\_\_\_

Address \_\_\_\_\_

**Tax Year 2014**  
 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 AUGUST 20, 2014**

**MAKE CHECK OR MONEY ORDER TO:**  
 VILLAGE OF WALTON HILLS  
 7595 Walton Rd  
 Walton Hills OH 44146-5072

Voice 440-232-7800 Fax 440-232-4070

Period Ending JULY

TAX ID \_\_\_\_\_

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

|  |   |  |  |
|--|---|--|--|
| 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 2.500 %. . . . .   | 4 |  |  |
| 5. Adjustments of Tax for Prior Period. . . . .  | 5 |  |  |
| 6. Interest on Late Payment. . . . .   | 6 |  |  |
| 7. Penalty on Late Payment. . . . .  | 7 |  |  |
| 8. Total (Include Interest and Penalty if Due). . . . .                                  | 8 |  |  |

**Tax Year 2014**

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 SEPTEMBER 20, 2014**

**MAKE CHECK OR MONEY ORDER TO:**  
VILLAGE OF WALTON HILLS  
7595 Walton Rd  
Walton Hills OH 44146-5072

Voice 440-232-7800 Fax 440-232-4070

Name \_\_\_\_\_

And \_\_\_\_\_

Address \_\_\_\_\_

Period Ending AUGUST

TAX ID \_\_\_\_\_

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

|  |   |  |  |
|--|---|--|--|
| 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 2.500 %. . . . .   | 4 |  |  |
| 5. Adjustments of Tax for Prior Period. . . . .  | 5 |  |  |
| 6. Interest on Late Payment. . . . .   | 6 |  |  |
| 7. Penalty on Late Payment. . . . .  | 7 |  |  |
| 8. Total (Include Interest and Penalty if Due). . . . .                                  | 8 |  |  |

**Tax Year 2014**

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 20, 2014**

**MAKE CHECK OR MONEY ORDER TO:**  
VILLAGE OF WALTON HILLS  
7595 Walton Rd  
Walton Hills OH 44146-5072

Voice 440-232-7800 Fax 440-232-4070

Name \_\_\_\_\_

And \_\_\_\_\_

Address \_\_\_\_\_

Period Ending SEPTEMBER

TAX ID \_\_\_\_\_

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

|  |   |  |  |
|--|---|--|--|
| 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 2.500 %. . . . .   | 4 |  |  |
| 5. Adjustments of Tax for Prior Period. . . . .  | 5 |  |  |
| 6. Interest on Late Payment. . . . .   | 6 |  |  |
| 7. Penalty on Late Payment. . . . .  | 7 |  |  |
| 8. Total (Include Interest and Penalty if Due). . . . .                                  | 8 |  |  |

Name  
 And  
 Address

**Tax Year 2014**

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 NOVEMBER 20, 2014**

**MAKE CHECK OR MONEY ORDER TO:**  
 VILLAGE OF WALTON HILLS  
 7595 Walton Rd  
 Walton Hills OH 44146-5072

Voice 440-232-7800 Fax 440-232-4070

Period Ending OCTOBER

TAX ID

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

|  |   |  |  |
|--|---|--|--|
| 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 2.500 %. . . . .   | 4 |  |  |
| 5. Adjustments of Tax for Prior Period. . . . .  | 5 |  |  |
| 6. Interest on Late Payment. . . . .   | 6 |  |  |
| 7. Penalty on Late Payment. . . . .  | 7 |  |  |
| 8. Total (Include Interest and Penalty if Due). . . . .                                  | 8 |  |  |

Name  
 And  
 Address

**Tax Year 2014**

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 DECEMBER 20, 2014**

**MAKE CHECK OR MONEY ORDER TO:**  
 VILLAGE OF WALTON HILLS  
 7595 Walton Rd  
 Walton Hills OH 44146-5072

Voice 440-232-7800 Fax 440-232-4070

Period Ending NOVEMBER

TAX ID

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

|   |   |  |  |
|---|---|--|--|
| 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 2.500 %. ....   | 4 |  |  |
| 5. Adjustments of Tax for Prior Period. ....  | 5 |  |  |
| 6. Interest on Late Payment. ....   | 6 |  |  |
| 7. Penalty on Late Payment. ....  | 7 |  |  |
| 8. Total (Include Interest and Penalty if Due). ....                                  | 8 |  |  |

**Tax Year 2014**

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 JANUARY 20, 2015**

**MAKE CHECK OR MONEY ORDER TO:**  
 VILLAGE OF WALTON HILLS  
 7595 Walton Rd  
 Walton Hills OH 44146-5072

Voice 440-232-7800 Fax 440-232-4070

Name \_\_\_\_\_  
 And \_\_\_\_\_  
 Address \_\_\_\_\_

Period Ending **DECEMBER**

TAX ID \_\_\_\_\_

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