

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 2018**

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 15, 2018**

**MAKE CHECK OR MONEY ORDER TO:**  
WALTON HILLS - SAGAMORE HILLS JEDD  
7595 Walton Rd  
Walton Hills OH 44146

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.

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 2018**

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 15, 2018**

**MAKE CHECK OR MONEY ORDER TO:**  
WALTON HILLS - SAGAMORE HILLS JEDD  
7595 Walton Rd  
Walton Hills OH 44146

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.

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 2018**

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 15, 2018**

**MAKE CHECK OR MONEY ORDER TO:**  
WALTON HILLS - SAGAMORE HILLS JEDD  
7595 Walton Rd  
Walton Hills OH 44146

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.

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 2018**

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 # \_\_\_\_\_

<p><b>THIS RETURN MUST BE FILED ON OR BEFORE MAY 15, 2018</b></p> <p><b>MAKE CHECK OR MONEY ORDER TO:</b> WALTON HILLS - SAGAMORE HILLS JEDD 7595 Walton Rd Walton Hills OH 44146</p> <p>Voice 440-232-7800 Fax 440-232-4070</p>
--

Name \_\_\_\_\_

And \_\_\_\_\_

Address \_\_\_\_\_

Period Ending APRIL

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 2018**

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 # \_\_\_\_\_

<p><b>THIS RETURN MUST BE FILED ON OR BEFORE JUNE 15, 2018</b></p> <p><b>MAKE CHECK OR MONEY ORDER TO:</b> WALTON HILLS - SAGAMORE HILLS JEDD 7595 Walton Rd Walton Hills OH 44146</p> <p>Voice 440-232-7800 Fax 440-232-4070</p>
---

Name \_\_\_\_\_

And \_\_\_\_\_

Address \_\_\_\_\_

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 2018**  
 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 15, 2018**

**MAKE CHECK OR MONEY ORDER TO:**  
 WALTON HILLS - SAGAMORE HILLS JEDD  
 7595 Walton Rd  
 Walton Hills OH 44146

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 2018**  
 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 15, 2018**

**MAKE CHECK OR MONEY ORDER TO:**  
 WALTON HILLS - SAGAMORE HILLS JEDD  
 7595 Walton Rd  
 Walton Hills OH 44146

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		

Name \_\_\_\_\_

And \_\_\_\_\_

Address \_\_\_\_\_

**Tax Year 2018**  
 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 15, 2018**

**MAKE CHECK OR MONEY ORDER TO:**  
 WALTON HILLS - SAGAMORE HILLS JEDD  
 7595 Walton Rd  
 Walton Hills OH 44146

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

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		

Name \_\_\_\_\_

And \_\_\_\_\_

Address \_\_\_\_\_

**Tax Year 2018**  
 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 15, 2018**

**MAKE CHECK OR MONEY ORDER TO:**  
 WALTON HILLS - SAGAMORE HILLS JEDD  
 7595 Walton Rd  
 Walton Hills OH 44146

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

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		

**Tax Year 2018**

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 # \_\_\_\_\_

<p><b>THIS RETURN MUST BE FILED ON OR BEFORE NOVEMBER 15, 2018</b></p> <p><b>MAKE CHECK OR MONEY ORDER TO:</b> WALTON HILLS - SAGAMORE HILLS JEDD 7595 Walton Rd Walton Hills OH 44146</p> <p>Voice 440-232-7800 Fax 440-232-4070</p>
---

Name \_\_\_\_\_

And \_\_\_\_\_

Address \_\_\_\_\_

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		

**Tax Year 2018**

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 # \_\_\_\_\_

<p><b>THIS RETURN MUST BE FILED ON OR BEFORE DECEMBER 15, 2018</b></p> <p><b>MAKE CHECK OR MONEY ORDER TO:</b> WALTON HILLS - SAGAMORE HILLS JEDD 7595 Walton Rd Walton Hills OH 44146</p> <p>Voice 440-232-7800 Fax 440-232-4070</p>
---

Name \_\_\_\_\_

And \_\_\_\_\_

Address \_\_\_\_\_

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 2018**

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 15, 2019**

**MAKE CHECK OR MONEY ORDER TO:**  
WALTON HILLS - SAGAMORE HILLS JEDD  
7595 Walton Rd  
Walton Hills OH 44146

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.