

CITY OF TRENTON: STATEMENT OF EMPLOYER'S TAX WITHHELD

_____ 2020
MONTH

PLEASE REMIT TO:
CITY OF TRENTON
INCOME TAX DEPARTMENT
11 EAST STATE STREET
TRENTON, OH 45067
(513) 428-0158

FEDERAL ID: _____

I HAVE EXAMINED THIS RETURN AND TO THE BEST
OF MY KNOWLEDGE IT IS CORRECT.

SIGNATURE TITLE DATE

PRINT NAME PRINT TITLE PHONE

COMPANY NAME

MAILING ADDRESS

DATE DUE _____ 15th

	LIABILITY	COURTESY
1. GROSS WAGES THIS PERIOD	\$	\$
2. INCOME TAX WITHHELD (1.5% OF GROSS PAYROLL)	\$	\$
3. PREVIOUS PERIOD ADJUSTMENT (ATTACH STATEMENT)	\$	\$
4. LATE PENALTY 50% (AFTER THE 15TH)	\$	\$
5. AMOUNT DUE AND PAYABLE	\$	\$

CHECK HERE TO INACTIVATE THIS ACCOUNT
INACTIVE DATE _____ EXPLANATION _____

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