## **FORM W1 1128 EMPLOYER'S WITHHOLDING - MONTHLY** Tax Year 2023 2. Total Salaries, Wages, Commissions and other Compensation 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. Title\_ 4. Actual Tax Withheld at 1.000 %..... Phone # THIS RETURN MUST BE FILED ON 6 OR BEFORE FEBRUARY 15, 2023 7. Penalty 50%..... MAKE CHECK OR MONEY ORDER TO: CITY OF SOUTH LEBANON -TAX DEPT. NOW ACCEPTING MASTERCARD, VISA AND DISCOVER 10 N HIGH STREET SOUTH LEBANON OH 45065 Name And Voice 513-494-2296 Ext 3 Fax 513-672-9599

Address

Period Ending JANUARY

TAX ID

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

FORM W1 1128	EMPLOYER'S WITHHOLD	NG - MONTHLY
Number of Taxable Employees		<b>-</b> <i>y</i>
2. Total Salaries, Wages, Commissions and o	ther 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 1.000 %		Phone #
5. Adjustments of Tax for Prior Period		THIS RETURN MUST BE FILED ON
6. Interest: .583% per month		OR BEFORE MARCH 15, 2023
7. Penalty 50%		MAKE CHECK OR MONEY ORDER TO:
NOW ACCEPTING MASTERCARD, VISA AN		CITY OF SOUTH LEBANON -TAX DEPT.
,		10 N HIGH STREET
Name		SOUTH LEBANON OH 45065
And		Voice 513-494-2296 Ext 3 Fax 513-672-9599
		Voice 313-434-2230 Ext 3 1 ax 313-072-3333
Address		Period Ending FEBRUARY
		TAX ID
		NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.
FORM W1 1128	EMPLOYER'S WITHHOLD	NG MONTHLY
		NG - MONTHET
<ol> <li>Number of Taxable Employees.</li> <li>Total Salaries, Wages, Commissions and o</li> </ol>		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
<ul><li>4. Actual Tax Withheld at 1.000 %</li><li>5. Adjustments of Tax for Prior Period</li></ul>		Phone#THIS RETURN MUST BE FILED ON
6. Interest: .583% per month		OR BEFORE APRIL 15, 2023
7. Penalty 50%		
8. Total (Include Interest and Penalty if Due)		MAKE CHECK OR MONEY ORDER TO:
NOW ACCEPTING MASTERCARD, VISA AN	D DISCOVER	CITY OF SOUTH LEBANON -TAX DEPT.  10 N HIGH STREET
Name		SOUTH LEBANON OH 45065
And		Voice 513-494-2296 Ext 3 Fax 513-672-9599
Address		Period Ending MARCH
		TAX ID
		NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.
FORM W1 1128	EMPLOYER'S WITHHOLD	NG - MONTHLY
Number of Taxable Employees		
2. Total Salaries, Wages, Commissions and o		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	
4. Actual Tax Withheld at 1.000 %		Phone #
5. Adjustments of Tax for Prior Period		THIS RETURN MUST BE FILED ON
6. Interest: .583% per month	6	OR BEFORE MAY 15, 2023
7. Penalty 50%	7	MAKE CHECK OR MONEY ORDER TO:
8. Total (Include Interest and Penalty if Due)	8	CITY OF SOUTH LEBANON -TAX DEPT.
NOW ACCEPTING MASTERCARD, VISA AN	D DISCOVER	10 N HIGH STREET
Name		SOUTH LEBANON OH 45065
And		Voice 513-494-2296 Ext 3 Fax 513-672-9599

TAX ID

Period Ending APRIL

Address

FORM W1 1128 EMPLO	OYER'S WITHHOLDING	i - MONTHLY
Number of Taxable Employees	1	T V 0000
2. Total Salaries, Wages, Commissions and other Compe		Tax Year 2023  I hereby certify that the information and statements contained her
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
I. Actual Tax Withheld at 1.000 %		Phone #
i. Adjustments of Tax for Prior Period	5	THIS RETURN MUST BE FILED ON
i. Interest: .583% per month.	6	
Penalty 50%.	7	OR BEFORE JUNE 15, 2023
B. Total (Include Interest and Penalty if Due)	8	MAKE CHECK OR MONEY ORDER TO:
NOW ACCEPTING MASTERCARD, VISA AND DISCOVE		CITY OF SOUTH LEBANON -TAX DEPT.
		10 N HIGH STREET
Name		SOUTH LEBANON OH 45065
And		Voice 513-494-2296 Ext 3 Fax 513-672-9599
Addroop		
Address		Period Ending MAY
		TAX ID
		NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.
FORM W4 4400 FMPL	OVERIO WITHIOL RING	MONTHLY
	OYER'S WITHHOLDING	- MONTHLY
. Number of Taxable Employees		Tax Year 2023
. Total Salaries, Wages, Commissions and other Compe		I hereby certify that the information and statements contained her
aid all employees		in and in any schedules or exhibits attached are true and correct.
		Signed
. Taxable Earnings (from line 2)	3	Title Date
Actual Tax Withheld at 1.000 %		Phone #
. Adjustments of Tax for Prior Period	5	THIS RETURN MUST BE FILED ON
Interest: .583% per month.	6	OR BEFORE JULY 15, 2023
Penalty 50%	7	
. Total (Include Interest and Penalty if Due)	8	MAKE CHECK OR MONEY ORDER TO:
OW ACCEPTING MASTERCARD, VISA AND DISCOVE		CITY OF SOUTH LEBANON -TAX DEPT.
Nama		10 N HIGH STREET SOUTH LEBANON OH 45065
Name		300TITLEBANON OIT 43003
And		Voice 512 404 2206 Fut 2 Fey 512 672 050
7 11 14		Voice 513-494-2296 Ext 3 Fax 513-672-9599
Address		Desired Funding HINE
		Period Ending JUNE
		TAX ID
		NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.
FORM W1 1128 EMPLO	OYER'S WITHHOLDING	- MONTHLY
. Number of Taxable Employees	1	Tax Year 2023
2. Total Salaries, Wages, Commissions and other Compe		I hereby certify that the information and statements contained her
aid all employees	2	in and in any schedules or exhibits attached are true and correct.
		Signed
. Taxable Earnings (from line 2)	3	Title Date
Actual Tax Withheld at 1.000 %		Phone # Date
Adjustments of Tax for Prior Period	<u></u>	
Interport 5000/ per month		THIS RETURN MUST BE FILED ON
Interest: .583% per month	7	OR BEFORE AUGUST 15, 2023
Penalty 50%  Total (Include Interest and Penalty if Due)		MAKE CHECK OR MONEY ORDER TO:
OW ACCEPTING MASTERCARD, VISA AND DISCOVE		CITY OF SOUTH LEBANON -TAX DEPT.
C		10 N HIGH STREET
Name		SOUTH LEBANON OH 45065
And		Voice 513-494-2296 Ext 3 Fax 513-672-9599

Period Ending JULY

TAX ID

Address

FORM W1 1128 EMPLOYER	R'S WITHHOLDII	IG - MONTHLY
Number of Taxable Employees	1	T V 0000
2. Total Salaries, Wages, Commissions and other Compensation		Tax Year 2023  I hereby certify that the information and statements contained her
paid all employees	2	in and in any schedules or exhibits attached are true and correct.
		Signed
3. Taxable Earnings (from line 2)	2	Title Date
4. Actual Tax Withheld at 1.000 %		
5. Adjustments of Tax for Prior Period	4	Phone #
5. Adjustifients of Tax for Prior Period	5	THIS RETURN MUST BE FILED ON
6. Interest: .583% per month	7	OR BEFORE SEPTEMBER 15, 2023
8. Total (Include Interest and Penalty if Due)	. 8	MAKE CHECK OR MONEY ORDER TO:
NOW ACCEPTING MASTERCARD, VISA AND DISCOVER	••[-]	CITY OF SOUTH LEBANON -TAX DEPT.
		10 N HIGH STREET
Name		SOUTH LEBANON OH 45065
And		
And		Voice 513-494-2296 Ext 3 Fax 513-672-9599
A dalua a a		
Address		Period Ending AUGUST
		TAX ID
		NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.
		NOTH THOOME 1700 BET ALTIMENT FROM TET OF ANY OF MINOE IN OWNER, ON THE ANY AUGUST AND AUGUST.
FORM W1 1128 EMPLOYER	R'S WITHHOLDII	IG - MONTHI Y
Number of Taxable Employees		Tax Year 2023
paid all employees		I hereby certify that the information and statements contained here
paid all omployood.	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 1.000 %	4	Phone #
5. Adjustments of Tax for Prior Period	5	THIS RETURN MUST BE FILED ON
6. Interest: .583% per month	6	OR BEFORE OCTOBER 15, 2023
7. Penalty 50%	/	MAKE CHECK OR MONEY ORDER TO:
8. Total (Include Interest and Penalty if Due)	8	CITY OF SOUTH LEBANON -TAX DEPT.
NOW ACCEPTING MASTERCARD, VISA AND DISCOVER	,	10 N HIGH STREET
Name		SOUTH LEBANON OH 45065
Name		333111223/111011 311 10000
And		Voice 513-494-2296 Ext 3 Fax 513-672-9599
		Voice 310-434-2230 LXL 3 1 ax 310-072-3333
Address		Davied Funding CEDTEMPED
		Period Ending SEPTEMBER
		TAX ID
		NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.
FORM W1 1128 EMPLOYER	R'S WITHHOLDII	IG - MONTHLY
1. Number of Tayable Employees	11	
Number of Taxable Employees		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 1.000 %	4	Phone #
5. Adjustments of Tax for Prior Period	5	THIS RETURN MUST BE FILED ON
6. Interest: .583% per month	6	OR BEFORE NOVEMBER 15, 2023
7. Penalty 50%	/	MAKE CHECK OR MONEY ORDER TO:
8. Total (Include Interest and Penalty if Due)	8	CITY OF SOUTH LEBANON -TAX DEPT.
NOW ACCEPTING MASTERCARD, VISA AND DISCOVER	<del></del>	10 N HIGH STREET
Name		SOUTH LEBANON OH 45065
Name		SOUTH LEBAROR OF 40000
And		Voice 513-494-2296 Ext 3 Fax 513-672-9599
,		VOICE 313-494-2290 EXL 3 FAX 313-072-9399

Period Ending OCTOBER

TAX ID

Address

1. Number of Taxable Employees		
2. Total Salaries, Wages, Commissions and other Compensation		Tax Year 2023
paid all employees		nat the information and statements contained here nedules or exhibits attached are true and correct.
2. Tarable Faminas (from the 0)		D.t.
3. Taxable Earnings (from line 2).		Date
4. Actual Tax Withheld at 1.000 %	Phone #	
5. Adjustments of Tax for Prior Period		TURN MUST BE FILED ON
7. Penalty 50%.		RE DECEMBER 15, 2023
8. Total (Include Interest and Penalty if Due)		CHECK OR MONEY ORDER TO:
NOW ACCEPTING MASTERCARD, VISA AND DISCOVER	CITY	OF SOUTH LEBANON -TAX DEPT.
Name		10 N HIGH STREET
Name	3	OUTH LEBANON OH 45065
And	Voice 513	494-2296 Ext 3 Fax 513-672-9599
	Voice 313	494-2290 EXE 5 T AX 313-072-9399
Address	Period Ending	NOVEMBER
		J NOVEMBER
	TAX ID	
	NOTIFY INCOME TAX DEPARTMENT PROMPTLY O	F ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.
	NOTIFY INCOME TAX DEPARTMENT PROMPTLY (	IF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.
		IF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.
FORM W1 1128 EMPLOYER'S	NOTIFY INCOME TAX DEPARTMENT PROMPTLY O	IF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.
1. Number of Taxable Employees	ITHHOLDING - MONTHLY	Tax Year 2023
1. Number of Taxable Employees	ITHHOLDING - MONTHLY  I hereby certify t	
1. Number of Taxable Employees	ITHHOLDING - MONTHLY  I hereby certify to in and in any solution.	Tax Year 2023  nat the information and statements contained here nedules or exhibits attached are true and correct.
1. Number of Taxable Employees	ITHHOLDING - MONTHLY  I hereby certify t in and in any sol	<b>Tax Year 2023</b> nat the information and statements contained here nedules or exhibits attached are true and correct.
Number of Taxable Employees	ITHHOLDING - MONTHLY  I hereby certify t in and in any sol Signed  Title	Tax Year 2023  nat the information and statements contained here nedules or exhibits attached are true and correct.  Date
1. Number of Taxable Employees	ITHHOLDING - MONTHLY  I hereby certify t in and in any sol Signed  Title Phone #	Tax Year 2023  nat the information and statements contained here nedules or exhibits attached are true and correct.  Date
1. Number of Taxable Employees	ITHHOLDING - MONTHLY  I hereby certify t in and in any sol Signed  Title Phone # THIS RE	Tax Year 2023  nat the information and statements contained here needules or exhibits attached are true and correct.  Date  TURN MUST BE FILED ON
1. Number of Taxable Employees	ITHHOLDING - MONTHLY  I hereby certify t in and in any sol Signed  Title Phone #  THIS RE OR BEFO	Tax Year 2023  nat the information and statements contained here needules or exhibits attached are true and correct.  Date  TURN MUST BE FILED ON  RE JANUARY 15, 2024
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Number of Taxable Employees.  Total Salaries, Wages, Commissions and other Compensation paid all employees.  Taxable Earnings (from line 2).  Actual Tax Withheld at 1.000 %.  Adjustments of Tax for Prior Period.  Interest: .583% per month.  Penalty 50%.  Total (Include Interest and Penalty if Due).  NOW ACCEPTING MASTERCARD, VISA AND DISCOVER	ITHHOLDING - MONTHLY  I hereby certify t in and in any sol Signed  Title  Phone #  THIS RE  OR BEFO  MAKE O  CITY  S	Tax Year 2023  nat the information and statements contained here needules or exhibits attached are true and correct.  Date  TURN MUST BE FILED ON  RE JANUARY 15, 2024  CHECK OR MONEY ORDER TO:  OF SOUTH LEBANON -TAX DEPT.  10 N HIGH STREET
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NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.