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3. Taxable Earnings (from line 2). . . . .	3	
4. Actual Tax Withheld at 1.000 %. . . . .	4	
5. Adjustments of Tax for Prior Period. . . . .	5	
6. Interest: .830% per month. . . . .	6	
7. Penalty 50%. . . . .	7	
8. Total (Include Interest and Penalty if Due). . . . .	8	

NOW ACCEPTING MASTERCARD, VISA AND DISCOVER

Name

And

Address

Tax Year 2025

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 18, 2025

MAKE CHECK OR MONEY ORDER TO:  
CITY OF SOUTH LEBANON -TAX DEPT.  
10 N HIGH STREET  
SOUTH LEBANON OH 45065

Voice 513-494-2296 x3      Fax 513-672-9599

Period Ending JAN 15

TAX ID

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

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Title \_\_\_\_\_ Date \_\_\_\_\_

Phone # \_\_\_\_\_

THIS RETURN MUST BE FILED ON  
OR BEFORE FEBRUARY 3, 2025

MAKE CHECK OR MONEY ORDER TO:  
CITY OF SOUTH LEBANON -TAX DEPT.  
10 N HIGH STREET  
SOUTH LEBANON OH 45065

Voice 513-494-2296 x3      Fax 513-672-9599

Period Ending JAN 31

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

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CITY OF SOUTH LEBANON -TAX DEPT.  
10 N HIGH STREET  
SOUTH LEBANON OH 45065

Voice 513-494-2296 x3      Fax 513-672-9599

Period Ending FEB 15

TAX ID

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Title \_\_\_\_\_ Date \_\_\_\_\_

Phone # \_\_\_\_\_

THIS RETURN MUST BE FILED ON  
OR BEFORE MARCH 3, 2025

MAKE CHECK OR MONEY ORDER TO:  
CITY OF SOUTH LEBANON -TAX DEPT.  
10 N HIGH STREET  
SOUTH LEBANON OH 45065

Voice 513-494-2296 x3 Fax 513-672-9599

Period Ending FEB 28

TAX ID

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

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10 N HIGH STREET  
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Voice 513-494-2296 x3 Fax 513-672-9599

Period Ending MAR 15

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Signed \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_

Phone # \_\_\_\_\_

THIS RETURN MUST BE FILED ON  
OR BEFORE APRIL 3, 2025

MAKE CHECK OR MONEY ORDER TO:  
CITY OF SOUTH LEBANON -TAX DEPT.  
10 N HIGH STREET  
SOUTH LEBANON OH 45065

Voice 513-494-2296 x3 Fax 513-672-9599

Period Ending MAR 31

TAX ID

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Title \_\_\_\_\_ Date \_\_\_\_\_

Phone # \_\_\_\_\_

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Period Ending APR 15

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Signed \_\_\_\_\_  
Title \_\_\_\_\_ Date \_\_\_\_\_  
Phone # \_\_\_\_\_

**THIS RETURN MUST BE FILED ON  
OR BEFORE MAY 3, 2025**  
**MAKE CHECK OR MONEY ORDER TO:**  
CITY OF SOUTH LEBANON -TAX DEPT.  
10 N HIGH STREET  
SOUTH LEBANON OH 45065  
Voice 513-494-2296 x3 Fax 513-672-9599

Period Ending APR 30

TAX ID

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

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**Tax Year 2025**  
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Title \_\_\_\_\_ Date \_\_\_\_\_  
Phone # \_\_\_\_\_

**THIS RETURN MUST BE FILED ON  
OR BEFORE MAY 18, 2025**  
**MAKE CHECK OR MONEY ORDER TO:**  
CITY OF SOUTH LEBANON -TAX DEPT.  
10 N HIGH STREET  
SOUTH LEBANON OH 45065  
Voice 513-494-2296 x3 Fax 513-672-9599

Period Ending MAY 15

TAX ID

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Title \_\_\_\_\_ Date \_\_\_\_\_

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CITY OF SOUTH LEBANON -TAX DEPT.  
10 N HIGH STREET  
SOUTH LEBANON OH 45065

Voice 513-494-2296 x3 Fax 513-672-9599

Period Ending MAY 31

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Period Ending JUN 15

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Title \_\_\_\_\_ Date \_\_\_\_\_

Phone # \_\_\_\_\_

THIS RETURN MUST BE FILED ON  
OR BEFORE JULY 3, 2025

MAKE CHECK OR MONEY ORDER TO:  
CITY OF SOUTH LEBANON -TAX DEPT.  
10 N HIGH STREET  
SOUTH LEBANON OH 45065

Voice 513-494-2296 x3 Fax 513-672-9599

Period Ending JUN 30

TAX ID

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

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CITY OF SOUTH LEBANON -TAX DEPT.  
10 N HIGH STREET  
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Title \_\_\_\_\_ Date \_\_\_\_\_

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THIS RETURN MUST BE FILED ON  
OR BEFORE AUGUST 3, 2025

MAKE CHECK OR MONEY ORDER TO:  
CITY OF SOUTH LEBANON -TAX DEPT.  
10 N HIGH STREET  
SOUTH LEBANON OH 45065

Voice 513-494-2296 x3 Fax 513-672-9599

Period Ending JUL 31

TAX ID

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Title \_\_\_\_\_ Date \_\_\_\_\_

Phone # \_\_\_\_\_

THIS RETURN MUST BE FILED ON  
OR BEFORE SEPTEMBER 3, 2025

MAKE CHECK OR MONEY ORDER TO:  
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10 N HIGH STREET  
SOUTH LEBANON OH 45065

Voice 513-494-2296 x3 Fax 513-672-9599

Period Ending AUG 31

TAX ID

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10 N HIGH STREET  
SOUTH LEBANON OH 45065

Voice 513-494-2296 x3 Fax 513-672-9599

Period Ending SEP 15

TAX ID

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Signed \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_

Phone # \_\_\_\_\_

THIS RETURN MUST BE FILED ON  
OR BEFORE OCTOBER 3, 2025

MAKE CHECK OR MONEY ORDER TO:  
CITY OF SOUTH LEBANON -TAX DEPT.  
10 N HIGH STREET  
SOUTH LEBANON OH 45065

Voice 513-494-2296 x3 Fax 513-672-9599

Period Ending SEP 30

TAX ID

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THIS RETURN MUST BE FILED ON  
OR BEFORE NOVEMBER 3, 2025

MAKE CHECK OR MONEY ORDER TO:  
CITY OF SOUTH LEBANON -TAX DEPT.  
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SOUTH LEBANON OH 45065

Voice 513-494-2296 x3 Fax 513-672-9599

Period Ending OCT 31

TAX ID

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Address

Tax Year 2025

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 3, 2025

MAKE CHECK OR MONEY ORDER TO:  
CITY OF SOUTH LEBANON -TAX DEPT.  
10 N HIGH STREET  
SOUTH LEBANON OH 45065

Voice 513-494-2296 x3      Fax 513-672-9599

Period Ending NOV 30

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 1.000 %. ....	4	
5. Adjustments of Tax for Prior Period. ....	5	
6. Interest: .830% per month. ....	6	
7. Penalty 50%. ....	7	
8. Total (Include Interest and Penalty if Due). ....	8	

NOW ACCEPTING MASTERCARD, VISA AND DISCOVER

Name

And

Address

Tax Year 2025

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 18, 2025

MAKE CHECK OR MONEY ORDER TO:  
CITY OF SOUTH LEBANON -TAX DEPT.  
10 N HIGH STREET  
SOUTH LEBANON OH 45065

Voice 513-494-2296 x3      Fax 513-672-9599

Period Ending DEC 15

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 1.000 %. . . . .	4		
5. Adjustments of Tax for Prior Period. . . . .	5		
6. Interest: .830% per month. . . . .	6		
7. Penalty 50%. . . . .	7		
8. Total (Include Interest and Penalty if Due). . . . .	8		

NOW ACCEPTING MASTERCARD, VISA AND DISCOVER

Name

And

Address

Tax Year 2025

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 3, 2026

MAKE CHECK OR MONEY ORDER TO:  
CITY OF SOUTH LEBANON -TAX DEPT.  
10 N HIGH STREET  
SOUTH LEBANON OH 45065

Voice 513-494-2296 x3      Fax 513-672-9599

Period Ending DEC 31

TAX ID

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