

**VILLAGE OF WAYNE EMPLOYER'S QUARTERLY RETURN OF TAX WITHHELD**

AMENDED

**RETURN WITH PAYMENT**

	DOLLARS	CENTS
1. Taxable Earnings paid all Employees subject to Village of Wayne Income Tax..... 1. Is this a courtesy withholding? <input type="checkbox"/> YES Is this a final return? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, attach explanation		
2. Actual Tax Withheld in Village of Wayne ..... 2.		
3. Adjustment of Tax for prior quarter..... 3.		
4. Penalty (\$25.00 per month)..... 4.		
5. Interest (6% per month) ..... 5.		
6. Total – (Lines 2-5) ..... 6.		

I hereby certify that the information and statements contained herein are true and correct.

(Signed) \_\_\_\_\_

(Official Title) \_\_\_\_\_ Date \_\_\_\_\_

Federal ID no. \_\_\_\_\_

THIS RETURN MUST BE RECEIVED ON OR BEFORE THE DUE DATE SHOWN BELOW

MAKE CHECK OR MONEY ORDER PAYABLE TO  
**WAYNE TAX DEPARTMENT**

**MAIL TO:**

**VILLAGE OF WAYNE  
INCOME TAX DEPARTMENT**

125 SCHOOLHOUSE ST., PO BOX 39  
WAYNE, OH 43466  
TELEPHONE (419) 288-2288

**1**

**If receipt is desired, submit additional copy and enclose self-addressed, stamped envelope.**

NAME AND ADDRESS

FOR THE PERIOD ENDING  
**MARCH 31, 2017**

MUST BE RECEIVED BY  
**APRIL 30, 2017**

**Notify the Income Tax Department promptly of any change in Ownership, Name or Address.**

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**MAIL TO:**

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INCOME TAX DEPARTMENT**

125 SCHOOLHOUSE ST., PO BOX 39  
WAYNE, OH 43466  
TELEPHONE (419) 288-2288

**2**

**If receipt is desired, submit additional copy and enclose self-addressed, stamped envelope.**

NAME AND ADDRESS

FOR THE PERIOD ENDING  
**JUNE 30, 2017**

MUST BE RECEIVED BY  
**JULY 31, 2017**

**Notify the Income Tax Department promptly of any change in Ownership, Name or Address.**

**VILLAGE OF WAYNE EMPLOYER'S QUARTERLY RETURN OF TAX WITHHELD**

AMENDED

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(Signed) \_\_\_\_\_

(Official Title) \_\_\_\_\_ Date \_\_\_\_\_

Federal ID no. \_\_\_\_\_

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MAKE CHECK OR MONEY ORDER PAYABLE TO  
**WAYNE TAX DEPARTMENT**

**MAIL TO:**

**VILLAGE OF WAYNE  
INCOME TAX DEPARTMENT**

125 SCHOOLHOUSE ST., PO BOX 39  
WAYNE, OH 43466  
TELEPHONE (419) 288-2288

**3**

FOR THE PERIOD ENDING  
**SEPTEMBER 30, 2017**

MUST BE RECEIVED BY  
**OCTOBER 31, 2017**

NAME AND ADDRESS

Notify the Income Tax Department promptly of any change in Ownership, Name or Address.

**VILLAGE OF WAYNE EMPLOYER'S QUARTERLY RETURN OF TAX WITHHELD**

AMENDED

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(Signed) \_\_\_\_\_

(Official Title) \_\_\_\_\_ Date \_\_\_\_\_

Federal ID no. \_\_\_\_\_

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MAKE CHECK OR MONEY ORDER PAYABLE TO  
**WAYNE TAX DEPARTMENT**

**MAIL TO:**

**VILLAGE OF WAYNE  
INCOME TAX DEPARTMENT**

125 SCHOOLHOUSE ST., PO BOX 39  
WAYNE, OH 43466  
TELEPHONE (419) 288-2288

**4**

FOR THE PERIOD ENDING  
**DECEMBER 31, 2017**

MUST BE RECEIVED BY  
**JANUARY 31, 2018**

NAME AND ADDRESS

Notify the Income Tax Department promptly of any change in Ownership, Name or Address.

If receipt is desired, submit additional copy and enclose self-addressed, stamped envelope.