

1. Number of Taxable Employees. ....	1	
2. Total Salaries, Wages, Commissions and other Compensation paid all employees. ....	2	
3. User instructions. ....	3	
4. Taxable Earnings (line 2 minus 3). ....	4	
5. Actual Tax Withheld at 1.000 %. ....	5	
6. Adjustments of Tax for Prior Period. ....	6	
7. 1.5% Interest. ....	7	
8. 1.5% Penalty. ....	8	
9. Total (Include Interest and Penalty if Due). ....	9	

**Tax Year 2013**

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 31, 2014**

**MAKE CHECK OR MONEY ORDER TO:**  
 SYCAMORE VILLAGE INCOME TAX  
 P O BOX 69  
 SYCAMORE OH 44882-0069

Voice 419-927-6482 Fax 419-927-2272

Name

And

Address

Period Ending OCT-NOV-DEC

TAX ID

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