

CITY OF LOGAN, OHIO
(740) 385-2222

RETURN PART 1 — KEEP PART 2 FOR YOUR RECORDS
EMPLOYER'S MONTHLY RETURN OF TAX WITHHELD

Instructions on Reverse
side of Taxpayer's Copy

	DOLLARS	CENTS
1. Taxable Earnings paid all Employees subject to Logan, Ohio, City Income Tax 2%		
2. Actual Tax Withheld in quarter for City Income Tax	\$	
3. Adjustment of Tax for prior quarter (see instructions)	\$	
4. Interest: _____		
5. Penalty _____		
Total	\$	

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

(Signed) _____

(Official Title) _____ Date _____

**THIS RETURN MUST BE FILED
ON OR BEFORE THE DUE DATE SHOWN BELOW
MAKE CHECK OR MONEY ORDER PAYABLE TO**

NAME AND ADDRESS

MAIL TO: **CITY OF LOGAN, OHIO**
INCOME TAX DEPT.
P.O. BOX 343
LOGAN, OHIO 43138

FOR MONTHS OF

DUE ON OR BEFORE

FEIN _____

Notify Income Tax Department promptly of any change in ownership or name and address shown above.

If receipt is desired, return Taxpayer's Copy of this form and enclose self-addressed, stamped envelope.

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