

1. Each employer within the Village of Covington, Ohio, who employs one or more persons is required to withhold the tax of 1 1/2% percent from all compensation paid to employees at the time such compensation is paid, and pay the amount withheld to the Dept. of Taxation, P.O. Box 156, Covington, Ohio, in accordance with the following instructions:

(A) Returns and payments shall be made on a quarterly basis, and are due on or before the last day of the following month.

(B) Delinquent payments shall be liable to a penalty 1/2 of 1% per month. In addition for failure to remit taxes withheld from employees 5% per month, or fraction thereof, shall be assessed.

(C) The failure of any employer to receive or procure Form C-1 shall not excuse him from making this return or from paying the tax.

GENERAL INFORMATION

Village Form C-1
File With
Dept. of Taxation
P.O. Box 156
Village of Covington

VILLAGE OF COVINGTON INCOME TAX
RETURN OF INCOME TAX WITHHELD

ORIGINAL

On Salaries, Wages and Other Compensation

For period from _____ to _____

I declare that this return has been examined by me, and to the best of my knowledge and belief is a true, correct and complete return, made in good faith, pursuant to Village of Covington Income Tax Ordinance and the Regulations issued under the authority thereof.

(Signed) _____
(Corporation, Business or Trade Name)

By _____ Date _____

Name and address imprinted above are as shown by our records. If incorrect or if space is blank, please print your business name and address as you wish to show on our records.

- 1. Total Tax withheld during period -- \$ _____
- 2. Adjustment to prior returns ----- \$ _____
- 3. Total payable herewith ----- \$ _____

Make check or money-order payable to Village of Covington Tax Administrator. If No Tax Was Withheld Please Indicate None and Return.

Penalty \$ _____

Interest \$ _____

Total \$ _____

Village Form C-1
File With
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P.O. Box 156
Village of Covington

VILLAGE OF COVINGTON INCOME TAX
RETURN OF INCOME TAX WITHHELD

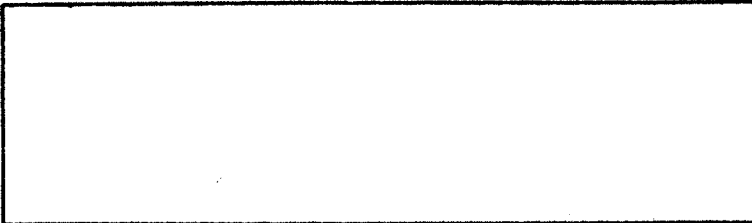
DUPLICATE

On Salaries, Wages and Other Compensation

For period from _____ to _____

DUPLICATE RETURN: Do not file this copy with the Administrator of Taxation. The original copy should be filed according to the instructions on the back hereof. If no tax was withheld, please explain on the original of this return and forward to the

Dept. Of Taxation
P.O. Box 156
Covington, Ohio 45318



1. Total Tax withheld during period -- \$ _____
2. Adjustment to prior returns ----- \$ _____
3. Total payable herewith ----- \$ _____

Make check or money-order payable to Village of Covington Tax Administrator. If No Tax Was Withheld Please Indicate None and Return.

**THIS COPY
MUST BE KEPT
BY EMPLOYER**

Penalty \$ _____

Interest \$ _____

Total \$ _____