

Form OH-1

VILLAGE OF OAK HARBOR - INCOME TAX DEPARTMENT

146 Church Street, P.O. Box 232, Oak Harbor, OH 43449-0232

Phone (419) 898-1611 Fax (419) 898-3502

Additional Forms Available at www.oakharbor.oh.us

Taxes withheld for the period checked:

Tax Year 20 ____

Jan thru March Due 4/30

April thru June Due 7/31

July thru Sept. Due 10/31

Oct. thru Dec. Due 1/31

Month of _____

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

Official Title _____ / / _____
Responsible Officer Date

FID # _____

1	No. of employees Represented in No. 2 Below	#
2	Total of Gross Wages before Payroll Deductions	\$
3	Withholding Tax at 1% of Line 2	\$
4	Penalty (5% per month, plus \$5.00 per month)	\$
5	Interest (1-1/2% per month)	\$
6	Total Enclosed (lines 3, 4, 5)	\$

MAKE CHECK OR MONEY ORDER PAYABLE TO:
"VILLAGE OF OAK HARBOR"

DETACH BEFORE COMPLETING

If name or address is incorrect, make necessary changes.