

FORM W1 1098

EMPLOYER'S WITHHOLDING - MONTHLY

1. Number of Taxable Employees. ....	1	
2. Total Salaries, Wages, Commissions and other Compensation paid all employees. ....	2	
3. Taxable Earnings (from line 2). ....	3	
4. Actual Tax Withheld at 2.000 %. ....	4	
5. Adjustments of Tax for Prior Period. ....	5	
6. Interest is assessed at .50% per month if not filed by due date.	6	
7. Penalty is assessed at 3.0% per month if not filed by due date.	7	
8. Total (Include Interest and Penalty if Due). ....	8	

Name  
And  
Address

Tax Year 2008

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 FEBRUARY 29, 2008**

**MAKE CHECK OR MONEY ORDER TO:**  
CITY OF RAVENNA INCOME TAX DEPT  
PO BOX 1215  
RAVENNA OH 44266-1215

Voice 330-297-7817 Fax 330-297-2164

Period Ending JANUARY

TAX ID

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

FORM W1 1098

EMPLOYER'S WITHHOLDING - MONTHLY

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And  
Address

Tax Year 2008

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Signed \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_

Phone # \_\_\_\_\_

**THIS RETURN MUST BE FILED ON  
OR BEFORE MARCH 31, 2008**

**MAKE CHECK OR MONEY ORDER TO:**  
CITY OF RAVENNA INCOME TAX DEPT  
PO BOX 1215  
RAVENNA OH 44266-1215

Voice 330-297-7817 Fax 330-297-2164

Period Ending FEBRUARY

TAX ID

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

1. Number of Taxable Employees. ....	1	
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Name

And

Address

Tax Year 2008

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Signed \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_

Phone # \_\_\_\_\_

**THIS RETURN MUST BE FILED ON OR BEFORE APRIL 30, 2008**

**MAKE CHECK OR MONEY ORDER TO:**

CITY OF RAVENNA INCOME TAX DEPT  
PO BOX 1215  
RAVENNA OH 44266-1215

Voice 330-297-7817 Fax 330-297-2164

Period Ending MARCH

TAX ID

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

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Name

And

Address

Tax Year 2008

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Signed \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_

Phone # \_\_\_\_\_

**THIS RETURN MUST BE FILED ON OR BEFORE MAY 31, 2008**

**MAKE CHECK OR MONEY ORDER TO:**

CITY OF RAVENNA INCOME TAX DEPT  
PO BOX 1215  
RAVENNA OH 44266-1215

Voice 330-297-7817 Fax 330-297-2164

Period Ending APRIL

TAX ID

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

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Name  
 And  
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Tax Year 2008

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Signed \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_

Phone # \_\_\_\_\_

**THIS RETURN MUST BE FILED ON  
 OR BEFORE JUNE 30, 2008**

**MAKE CHECK OR MONEY ORDER TO:**  
 CITY OF RAVENNA INCOME TAX DEPT  
 PO BOX 1215  
 RAVENNA OH 44266-1215

Voice 330-297-7817 Fax 330-297-2164

Period Ending MAY

TAX ID

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Signed \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_

Phone # \_\_\_\_\_

**THIS RETURN MUST BE FILED ON  
 OR BEFORE JULY 31, 2008**

**MAKE CHECK OR MONEY ORDER TO:**  
 CITY OF RAVENNA INCOME TAX DEPT  
 PO BOX 1215  
 RAVENNA OH 44266-1215

Voice 330-297-7817 Fax 330-297-2164

Period Ending JUNE

TAX ID

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

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Name  
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Address

Tax Year 2008

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Signed \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_

Phone # \_\_\_\_\_

**THIS RETURN MUST BE FILED ON  
OR BEFORE AUGUST 31, 2008**

**MAKE CHECK OR MONEY ORDER TO:**  
CITY OF RAVENNA INCOME TAX DEPT  
PO BOX 1215  
RAVENNA OH 44266-1215

Voice 330-297-7817 Fax 330-297-2164

Period Ending JULY

TAX ID

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

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Name  
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Tax Year 2008

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Signed \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_

Phone # \_\_\_\_\_

**THIS RETURN MUST BE FILED ON  
OR BEFORE SEPTEMBER 30, 2008**

**MAKE CHECK OR MONEY ORDER TO:**  
CITY OF RAVENNA INCOME TAX DEPT  
PO BOX 1215  
RAVENNA OH 44266-1215

Voice 330-297-7817 Fax 330-297-2164

Period Ending AUGUST

TAX ID

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

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Name \_\_\_\_\_

And \_\_\_\_\_

Address \_\_\_\_\_

Tax Year 2008

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 OCTOBER 31, 2008**

**MAKE CHECK OR MONEY ORDER TO:**  
CITY OF RAVENNA INCOME TAX DEPT  
PO BOX 1215  
RAVENNA OH 44266-1215

Voice 330-297-7817 Fax 330-297-2164

Period Ending SEPTEMBER

TAX ID \_\_\_\_\_

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

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Name \_\_\_\_\_

And \_\_\_\_\_

Address \_\_\_\_\_

Tax Year 2008

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 NOVEMBER 30, 2008**

**MAKE CHECK OR MONEY ORDER TO:**  
CITY OF RAVENNA INCOME TAX DEPT  
PO BOX 1215  
RAVENNA OH 44266-1215

Voice 330-297-7817 Fax 330-297-2164

Period Ending OCTOBER

TAX ID \_\_\_\_\_

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

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Address

Tax Year 2008

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Signed \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_

Phone # \_\_\_\_\_

**THIS RETURN MUST BE FILED ON OR BEFORE DECEMBER 31, 2008**

**MAKE CHECK OR MONEY ORDER TO:**

CITY OF RAVENNA INCOME TAX DEPT  
PO BOX 1215  
RAVENNA OH 44266-1215

Voice 330-297-7817 Fax 330-297-2164

Period Ending NOVEMBER

TAX ID

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

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Tax Year 2008

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Signed \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_

Phone # \_\_\_\_\_

**THIS RETURN MUST BE FILED ON OR BEFORE JANUARY 31, 2009**

**MAKE CHECK OR MONEY ORDER TO:**

CITY OF RAVENNA INCOME TAX DEPT  
PO BOX 1215  
RAVENNA OH 44266-1215

Voice 330-297-7817 Fax 330-297-2164

Period Ending DECEMBER

TAX ID

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