

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 0.000 %	4		
5. Adjustments of Tax for Prior Period	5		
6. Interest: .42% per month	6		
7. Penalty: 50% of tax due	7		
8. Total (Include Interest and Penalty if Due)	8		

Tax Year 2022

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 15, 2022**

MAKE CHECK OR MONEY ORDER TO:
 EAST LIVERPOOL TAX DEPARTMENT
 126 W 6th St
 East Liverpool OH 43920

Voice 330-385-5437 Fax 330-386-7865

Name

And

Address

Period Ending JANUARY

TAX ID

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

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 0.000 %	4	
5. Adjustments of Tax for Prior Period	5	
6. Interest: .42% per month	6	
7. Penalty: 50% of tax due	7	
8. Total (Include Interest and Penalty if Due)	8	

Name

And

Address

Tax Year 2022
 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 MARCH 15, 2022**

MAKE CHECK OR MONEY ORDER TO:
 EAST LIVERPOOL TAX DEPARTMENT
 126 W 6th St
 East Liverpool OH 43920

Voice 330-385-5437 Fax 330-386-7865

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	
2. Total Salaries, Wages, Commissions and other Compensation paid all employees	2	
3. Taxable Earnings (from line 2)	3	
4. Actual Tax Withheld at 0.000 %	4	
5. Adjustments of Tax for Prior Period	5	
6. Interest: .42% per month	6	
7. Penalty: 50% of tax due	7	
8. Total (Include Interest and Penalty if Due)	8	

Name

And

Address

Tax Year 2022
 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 APRIL 15, 2022**

MAKE CHECK OR MONEY ORDER TO:
 EAST LIVERPOOL TAX DEPARTMENT
 126 W 6th St
 East Liverpool OH 43920

Voice 330-385-5437 Fax 330-386-7865

Period Ending MARCH

TAX ID

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

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 0.000 %	4	
5. Adjustments of Tax for Prior Period	5	
6. Interest: .42% per month	6	
7. Penalty: 50% of tax due	7	
8. Total (Include Interest and Penalty if Due)	8	

Name

And

Address

Tax Year 2022
 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 MAY 15, 2022**

MAKE CHECK OR MONEY ORDER TO:
 EAST LIVERPOOL TAX DEPARTMENT
 126 W 6th St
 East Liverpool OH 43920

Voice 330-385-5437 Fax 330-386-7865

Period Ending APRIL

TAX ID

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

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 0.000 %	4	
5. Adjustments of Tax for Prior Period	5	
6. Interest: .42% per month	6	
7. Penalty: 50% of tax due	7	
8. Total (Include Interest and Penalty if Due)	8	

Name

And

Address

Tax Year 2022

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 JUNE 15, 2022**

MAKE CHECK OR MONEY ORDER TO:
 EAST LIVERPOOL TAX DEPARTMENT
 126 W 6th St
 East Liverpool OH 43920

Voice 330-385-5437 Fax 330-386-7865

Period Ending MAY

TAX ID

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

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 0.000 %	4	
5. Adjustments of Tax for Prior Period	5	
6. Interest: .42% per month	6	
7. Penalty: 50% of tax due	7	
8. Total (Include Interest and Penalty if Due)	8	

Name

And

Address

Tax Year 2022

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 JULY 15, 2022**

MAKE CHECK OR MONEY ORDER TO:
 EAST LIVERPOOL TAX DEPARTMENT
 126 W 6th St
 East Liverpool OH 43920

Voice 330-385-5437 Fax 330-386-7865

Period Ending JUNE

TAX ID

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

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 0.000 %	4	
5. Adjustments of Tax for Prior Period	5	
6. Interest: .42% per month	6	
7. Penalty: 50% of tax due	7	
8. Total (Include Interest and Penalty if Due)	8	

Name

And

Address

Tax Year 2022

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 AUGUST 15, 2022**

MAKE CHECK OR MONEY ORDER TO:
 EAST LIVERPOOL TAX DEPARTMENT
 126 W 6th St
 East Liverpool OH 43920

Voice 330-385-5437 Fax 330-386-7865

Period Ending JULY

TAX ID

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

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 0.000 %	4		
5. Adjustments of Tax for Prior Period	5		
6. Interest: .42% per month	6		
7. Penalty: 50% of tax due	7		
8. Total (Include Interest and Penalty if Due)	8		

Tax Year 2022

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 SEPTEMBER 15, 2022**

MAKE CHECK OR MONEY ORDER TO:
EAST LIVERPOOL TAX DEPARTMENT
126 W 6th St
East Liverpool OH 43920

Voice 330-385-5437 Fax 330-386-7865

Name

And

Address

Period Ending AUGUST

TAX ID

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

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 0.000 %	4		
5. Adjustments of Tax for Prior Period	5		
6. Interest: .42% per month	6		
7. Penalty: 50% of tax due	7		
8. Total (Include Interest and Penalty if Due)	8		

Tax Year 2022

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 15, 2022**

MAKE CHECK OR MONEY ORDER TO:
EAST LIVERPOOL TAX DEPARTMENT
126 W 6th St
East Liverpool OH 43920

Voice 330-385-5437 Fax 330-386-7865

Name

And

Address

Period Ending SEPTEMBER

TAX ID

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

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		
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5. Adjustments of Tax for Prior Period	5		
6. Interest: .42% per month	6		
7. Penalty: 50% of tax due	7		
8. Total (Include Interest and Penalty if Due)	8		

Tax Year 2022

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 15, 2022**

MAKE CHECK OR MONEY ORDER TO:
EAST LIVERPOOL TAX DEPARTMENT
126 W 6th St
East Liverpool OH 43920

Voice 330-385-5437 Fax 330-386-7865

Name

And

Address

Period Ending OCTOBER

TAX ID

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

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 0.000 %.....	4		
5. Adjustments of Tax for Prior Period.....	5		
6. Interest: .42% per month.....	6		
7. Penalty: 50% of tax due.....	7		
8. Total (Include Interest and Penalty if Due).....	8		

Tax Year 2022

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 DECEMBER 15, 2022**

MAKE CHECK OR MONEY ORDER TO:

**EAST LIVERPOOL TAX DEPARTMENT
126 W 6th St
East Liverpool OH 43920**

Voice 330-385-5437

Fax 330-386-7865

Name

And

Address

Period Ending **NOVEMBER**

TAX ID

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

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 0.000 %.....	4		
5. Adjustments of Tax for Prior Period.....	5		
6. Interest: .42% per month.....	6		
7. Penalty: 50% of tax due.....	7		
8. Total (Include Interest and Penalty if Due).....	8		

Tax Year 2022

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 15, 2023**

MAKE CHECK OR MONEY ORDER TO:

**EAST LIVERPOOL TAX DEPARTMENT
126 W 6th St
East Liverpool OH 43920**

Voice 330-385-5437

Fax 330-386-7865

Name

And

Address

Period Ending **DECEMBER**

TAX ID

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