FORM W1 1493 **EMPLOYER'S WITHHOLDING - QUARTERLY** 2. Total Salaries, Wages, Commissions and other Compensation 3. Taxable Earnings (from line 2)..... 4. Actual Tax Withheld at 1.500 %.....

Name

And

Address

Tax Year 2025 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 M	UST BE	FILED	ON	
OR B	EFORE APR	IL 30,	2025		
MAK	MAKE CHECK OR MONEY ORDER TO:				
	EAST LIVERPOOL TAX DEPARTMENT				
	126 W 6th St				
East Liverpool OH 43920					
Voice	330-385-5437	Ext	Fax 33	30-386-7865	

Period Ending JAN-FEB-MAR

TAX ID

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

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Address

Period Ending OCT-NOV-DEC

TAX ID