FORM W1 1100 201554	EMPLOYER'S WITHHOLDING -	UARTERLY 00001
Number of Taxable Employees		Tax Year 2020
Total Salaries, Wages, Commission paid all employees		I hereby certify that the information and statements contained here in and in any schedules or exhibits attached are true and correct.
		Signed
3. Taxable Earnings (from line 2)	3	Title Date
4. Actual Tax Withheld at 1.500 %		Phone #
5. Adjustments of Tax for Prior Period.		THIS RETURN MUST BE FILED ON
6. Interest- 0.50% per month	6	OR BEFORE APRIL 30, 2020
7. Penalty-50% Failure to File		MAKE CHECK OR MONEY ORDER TO:
8. Total (Include Interest and Penalty if	Due)	CITY OF SHELBY TAX DEPT.
Name		43 WEST MAIN STREET SHELBY OH 44875
And		Voice 419-342-5885 Ext Fax 419-347-1193
Address	en e	Period Ending JAN-FEB-MAR
		TAX ID
		NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.
		No.
FORM W1 1100 201555	EMPLOYER'S WITHHOLDING -	UARTERLY 00002
Number of Taxable Employees	1	
2. Total Salaries, Wages, Commissions	· ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	Tax Year 2020 I hereby certify that the information and statements contained here
paid all employees	2	in and in any schedules or exhibits attached are true and correct.
		Signed
3. Taxable Earnings (from line 2)	3	Title Date
4. Actual Tax Withheld at 1.500 %		Phone #
5. Adjustments of Tax for Prior Period.	5	THIS RETURN MUST BE FILED ON
6. Interest- 0.50% per month	6	OR BEFORE JULY 31, 2020
7. Penalty-50% Failure to File.	/	MAKE CHECK OR MONEY ORDER TO:
8. Total (Include Interest and Penalty if	Due)	CITY OF SHELBY TAX DEPT.
		43 WEST MAIN STREET
Name	•	SHELBY OH 44875
And		Voice 419-342-5885 Ext Fax 419-347-1193
_		
Address	,1 ·	Period Ending APR-MAY-JUN
		TAX ID
		NOTIFY INCOME TAX DEPARTMENT PROMPTLY OF ANY CHANGE IN OWNERSHIP OR NAME AND ADDRESS.
·	• •	A DECIDE SHAPE THE SHAPE THE REAL PROPERTY AND SHAPE S
FORM W1 1100 201556	EMPLOYER'S WITHHOLDING -	UARTERLY 00003
Number of Taxable Employees	1	Tax Year 2020
2. Total Salaries, Wages, Commissions paid all employees		I hereby certify that the information and statements contained here
paid all employees	2	in and in any schedules or exhibits attached are true and correct.
		Signed
3. Taxable Earnings (from line 2)		Title Date
4. Actual Tax Withheld at 1.500 %	4	Phone #
5. Adjustments of Tax for Prior Period.6. Interest- 0.50% per month		THIS RETURN MUST BE FILED ON
6. Interest- 0.50% per month	······································	OR BEFORE OCTOBER 31, 2020
8. Total (Include Interest and Penalty if	Due)8	MAKE CHECK OR MONEY ORDER TO:
· · · · · · · · · · · · · · · · · · ·		CITY OF SHELBY TAX DEPT. 43 WEST MAIN STREET
Name		SHELBY OH 44875
And	!	Voice 419-342-5885 Ext Fax 419-347-1193

FORM W1 1100 201554

Address

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

Period Ending JUL-AUG-SEP

TAX ID

FURM W1 1100 201557 EMPLOYER'S	S WITHHOLDING - QUARTERLY	00004	
Number of Taxable Employees	. 1	i	
Total Salaries, Wages, Commissions and other Compensation paid all employees.	1 1	Tax Year 2020 I hereby certify that the information and statements contained here in and in any schedules or exhibits attached are true and correct.	
		Signed	
3. Taxable Earnings (from line 2)	3	Title	Date
4. Actual Tax Withheld at 1.500 %	4	Phone #	
5. Adjustments of Tax for Prior Period	5	THIS RETURN M	UST BE FILED ON
6. Interest- 0.50% per month	. 6	OR BEFORE JAN	WARY 31, 2021
7. Penalty-50% Failure to File		MAKE CHECK (OR MONEY ORDER TO:
8. Total (Include Interest and Penalty if Due)		SHELBY TAX DEPT.	
,		· · · · · · · · · · · · · · · · · · ·	ST MAIN STREET
Name		SHELE	BY OH 44875
And		Voice 419-342-5885	Ext Fax 419-347-1193

Address

Period Ending OCT-NOV-DEC TAX ID

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