

**EMPLOYER'S RETURN OF INCOME TAX WITHHELD
CITY OF ATHENS, OHIO**

FOR PERIOD _____

Athens City Income Tax Rate is 1.65%

ACCOUNT NUMBER _____ DUE ON OR BEFORE _____

NAME _____

ADDRESS _____

Indicate Any Changes in Name or Address Above

- 1. Total Wages Paid this period \$ _____
- 2. Wages Subject to Athens tax this period \$ _____
- 3. Athens Tax withheld this period at **1.65%** (.0165)..... \$ _____
- 4. Adjustments to prior returns \$ _____

Explain: _____

5. Amount Paid Herewith	\$ _____
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I HEREBY CERTIFY THAT THE INFORMATION AND STATEMENTS CONTAINED
HEREIN ARE TRUE AND CORRECT.

Signature

Title Date

**FILE RETURN WITH: ATHENS INCOME TAX DEPARTMENT
8 EAST WASHINGTON STREET
ATHENS, OHIO 45701-2496**

**MAKE CHECK OR MONEY ORDER PAYABLE TO: CITY OF ATHENS INCOME
TAX DEPARTMENT**

