

**Robert C. Schirack, City Treasurer**  
Canton City Income Tax  
P.O. Box 9940  
Canton, Ohio 44711-9940

**Return of Income Tax Withheld**

For Period From: \_\_\_\_\_ To: \_\_\_\_\_

Tax Rate: (If other than 2%): \_\_\_\_\_

Account #: \_\_\_\_\_

Federal ID: \_\_\_\_\_

If you do not have employees this period please state so and return this form.

<i>Total Salaries and Wages</i>	
1. Subject to Canton Tax	
2. Total Tax Withheld This Period	
3. Adjustments To Prior Records	
4. Penalty 6% Per Month	
5. Amount Paid Herewith	

Avoid penalty - File and pay promptly

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

( )

\_\_\_\_\_  
*Title*

\_\_\_\_\_  
*Phone*

**Robert C. Schirack, City Treasurer**  
Canton City Income Tax  
P.O. Box 9940  
Canton, Ohio 44711-9940

**Return of Income Tax Withheld**

For Period From: \_\_\_\_\_ To: \_\_\_\_\_

Tax Rate: (If other than 2%): \_\_\_\_\_

Account #: \_\_\_\_\_

Federal ID: \_\_\_\_\_

If you do not have employees this period please state so and return this form.

<i>Total Salaries and Wages</i>	
1. Subject to Canton Tax	
2. Total Tax Withheld This Period	
3. Adjustments To Prior Records	
4. Penalty 6% Per Month	
5. Amount Paid Herewith	

Avoid penalty - File and pay promptly

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

( )

\_\_\_\_\_  
*Title*

\_\_\_\_\_  
*Phone*

**Robert C. Schirack, City Treasurer**  
Canton City Income Tax  
P.O. Box 9940  
Canton, Ohio 44711-9940

**Return of Income Tax Withheld**

For Period From: \_\_\_\_\_ To: \_\_\_\_\_

Tax Rate: (If other than 2%): \_\_\_\_\_

Account #: \_\_\_\_\_

Federal ID: \_\_\_\_\_

If you do not have employees this period please state so and return this form.

<i>Total Salaries and Wages</i>	
1. Subject to Canton Tax	
2. Total Tax Withheld This Period	
3. Adjustments To Prior Records	
4. Penalty 6% Per Month	
5. Amount Paid Herewith	

Avoid penalty - File and pay promptly

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

( )

\_\_\_\_\_  
*Title*

\_\_\_\_\_  
*Phone*

**Robert C. Schirack, City Treasurer**  
Canton City Income Tax  
P.O. Box 9940  
Canton, Ohio 44711-9940

**Return of Income Tax Withheld**

For Period From: \_\_\_\_\_ To: \_\_\_\_\_

Tax Rate: (If other than 2%): \_\_\_\_\_

Account #: \_\_\_\_\_

Federal ID: \_\_\_\_\_

If you do not have employees this period please state so and return this form.

<i>Total Salaries and Wages</i>	
1. Subject to Canton Tax	
2. Total Tax Withheld This Period	
3. Adjustments To Prior Records	
4. Penalty 6% Per Month	
5. Amount Paid Herewith	

Avoid penalty - File and pay promptly

\_\_\_\_\_  
*Signature* \_\_\_\_\_ *Date* \_\_\_\_\_  
( )  
\_\_\_\_\_  
*Title* \_\_\_\_\_ *Phone* \_\_\_\_\_

**Robert C. Schirack, City Treasurer**  
Canton City Income Tax  
P.O. Box 9940  
Canton, Ohio 44711-9940

**Return of Income Tax Withheld**

For Period From: \_\_\_\_\_ To: \_\_\_\_\_

Tax Rate: (If other than 2%): \_\_\_\_\_

Account #: \_\_\_\_\_

Federal ID: \_\_\_\_\_

If you do not have employees this period please state so and return this form.

<i>Total Salaries and Wages</i>	
1. Subject to Canton Tax	
2. Total Tax Withheld This Period	
3. Adjustments To Prior Records	
4. Penalty 6% Per Month	
5. Amount Paid Herewith	

Avoid penalty - File and pay promptly

\_\_\_\_\_  
*Signature* \_\_\_\_\_ *Date* \_\_\_\_\_  
( )  
\_\_\_\_\_  
*Title* \_\_\_\_\_ *Phone* \_\_\_\_\_

**Robert C. Schirack, City Treasurer**  
Canton City Income Tax  
P.O. Box 9940  
Canton, Ohio 44711-9940

**Return of Income Tax Withheld**

For Period From: \_\_\_\_\_ To: \_\_\_\_\_

Tax Rate: (If other than 2%): \_\_\_\_\_

Account #: \_\_\_\_\_

Federal ID: \_\_\_\_\_

If you do not have employees this period please state so and return this form.

<i>Total Salaries and Wages</i>	
1. Subject to Canton Tax	
2. Total Tax Withheld This Period	
3. Adjustments To Prior Records	
4. Penalty 6% Per Month	
5. Amount Paid Herewith	

Avoid penalty - File and pay promptly

\_\_\_\_\_  
*Signature* \_\_\_\_\_ *Date* \_\_\_\_\_  
( )  
\_\_\_\_\_  
*Title* \_\_\_\_\_ *Phone* \_\_\_\_\_

**Robert C. Schirack, City Treasurer**  
Canton City Income Tax  
P.O. Box 9940  
Canton, Ohio 44711-9940

**Return of Income Tax Withheld**

For Period From: \_\_\_\_\_ To: \_\_\_\_\_

Tax Rate: (If other than 2%): \_\_\_\_\_

Account #: \_\_\_\_\_

Federal ID: \_\_\_\_\_

If you do not have employees this period please state so and return this form.

<i>Total Salaries and Wages</i>	
1. Subject to Canton Tax	
2. Total Tax Withheld This Period	
3. Adjustments To Prior Records	
4. Penalty 6% Per Month	
5. Amount Paid Herewith	

Avoid penalty - File and pay promptly

\_\_\_\_\_  
*Signature* \_\_\_\_\_ *Date* \_\_\_\_\_  
( )  
\_\_\_\_\_  
*Title* \_\_\_\_\_ *Phone* \_\_\_\_\_

**Robert C. Schirack, City Treasurer**  
Canton City Income Tax  
P.O. Box 9940  
Canton, Ohio 44711-9940

**Return of Income Tax Withheld**

For Period From: \_\_\_\_\_ To: \_\_\_\_\_

Tax Rate: (If other than 2%): \_\_\_\_\_

Account #: \_\_\_\_\_

Federal ID: \_\_\_\_\_

If you do not have employees this period please state so and return this form.

<i>Total Salaries and Wages</i>	
1. Subject to Canton Tax	
2. Total Tax Withheld This Period	
3. Adjustments To Prior Records	
4. Penalty 6% Per Month	
5. Amount Paid Herewith	

Avoid penalty - File and pay promptly

\_\_\_\_\_  
*Signature* \_\_\_\_\_ *Date* \_\_\_\_\_  
( )  
\_\_\_\_\_  
*Title* \_\_\_\_\_ *Phone* \_\_\_\_\_

**Robert C. Schirack, City Treasurer**  
Canton City Income Tax  
P.O. Box 9940  
Canton, Ohio 44711-9940

**Return of Income Tax Withheld**

For Period From: \_\_\_\_\_ To: \_\_\_\_\_

Tax Rate: (If other than 2%): \_\_\_\_\_

Account #: \_\_\_\_\_

Federal ID: \_\_\_\_\_

If you do not have employees this period please state so and return this form.

<i>Total Salaries and Wages</i>	
1. Subject to Canton Tax	
2. Total Tax Withheld This Period	
3. Adjustments To Prior Records	
4. Penalty 6% Per Month	
5. Amount Paid Herewith	

Avoid penalty - File and pay promptly

\_\_\_\_\_  
*Signature* \_\_\_\_\_ *Date* \_\_\_\_\_  
( )  
\_\_\_\_\_  
*Title* \_\_\_\_\_ *Phone* \_\_\_\_\_

**Robert C. Schirack, City Treasurer**  
Canton City Income Tax  
P.O. Box 9940  
Canton, Ohio 44711-9940

**Return of Income Tax Withheld**

For Period From: \_\_\_\_\_ To: \_\_\_\_\_

Tax Rate: (If other than 2%): \_\_\_\_\_

Account #: \_\_\_\_\_

Federal ID: \_\_\_\_\_

If you do not have employees this period please state so and return this form.

<i>Total Salaries and Wages</i>	
1. Subject to Canton Tax	
2. Total Tax Withheld This Period	
3. Adjustments To Prior Records	
4. Penalty 6% Per Month	
5. Amount Paid Herewith	

Avoid penalty - File and pay promptly

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

( )

\_\_\_\_\_  
*Title*

\_\_\_\_\_  
*Phone*

**Robert C. Schirack, City Treasurer**  
Canton City Income Tax  
P.O. Box 9940  
Canton, Ohio 44711-9940

**Return of Income Tax Withheld**

For Period From: \_\_\_\_\_ To: \_\_\_\_\_

Tax Rate: (If other than 2%): \_\_\_\_\_

Account #: \_\_\_\_\_

Federal ID: \_\_\_\_\_

If you do not have employees this period please state so and return this form.

<i>Total Salaries and Wages</i>	
1. Subject to Canton Tax	
2. Total Tax Withheld This Period	
3. Adjustments To Prior Records	
4. Penalty 6% Per Month	
5. Amount Paid Herewith	

Avoid penalty - File and pay promptly

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

( )

\_\_\_\_\_  
*Title*

\_\_\_\_\_  
*Phone*

**Robert C. Schirack, City Treasurer**  
Canton City Income Tax  
P.O. Box 9940  
Canton, Ohio 44711-9940

**Return of Income Tax Withheld**

For Period From: \_\_\_\_\_ To: \_\_\_\_\_

Tax Rate: (If other than 2%): \_\_\_\_\_

Account #: \_\_\_\_\_

Federal ID: \_\_\_\_\_

If you do not have employees this period please state so and return this form.

<i>Total Salaries and Wages</i>	
1. Subject to Canton Tax	
2. Total Tax Withheld This Period	
3. Adjustments To Prior Records	
4. Penalty 6% Per Month	
5. Amount Paid Herewith	

Avoid penalty - File and pay promptly

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

( )

\_\_\_\_\_  
*Title*

\_\_\_\_\_  
*Phone*