

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 1.000 %.	4		
5. Adjustments of Tax for Prior Period.	5		
6. 0.750%.	6		
7. 50%.	7		
8. Total (Include Interest and Penalty if Due).	8		

Name

And

Address

Tax Year 2026

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 30, 2026

MAKE CHECK OR MONEY ORDER TO:
VILLAGE OF HICKSVILLE
111 S MAIN ST
HICKSVILLE OH 43526-1398

Voice 419-542-8621 Ext Fax 419-542-2018

Period Ending JAN-FEB-MAR

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 1.000 %.	4	
5. Adjustments of Tax for Prior Period.	5	
6. 0.750%.	6	
7. 50%.	7	
8. Total (Include Interest and Penalty if Due).	8	

Name

And

Address

Tax Year 2026

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 31, 2026

MAKE CHECK OR MONEY ORDER TO:
VILLAGE OF HICKSVILLE
111 S MAIN ST
HICKSVILLE OH 43526-1398

Voice 419-542-8621 Ext Fax 419-542-2018

Period Ending APR-MAY-JUN

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 1.000 %.	4	
5. Adjustments of Tax for Prior Period.	5	
6. 0.750%.	6	
7. 50%.	7	
8. Total (Include Interest and Penalty if Due).	8	

Name

And

Address

Tax Year 2026

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 31, 2026

MAKE CHECK OR MONEY ORDER TO:
VILLAGE OF HICKSVILLE
111 S MAIN ST
HICKSVILLE OH 43526-1398

Voice 419-542-8621 Ext Fax 419-542-2018

Period Ending JUL-AUG-SEP

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 1.000 %.	4		
5. Adjustments of Tax for Prior Period.	5		
6. 0.750%.	6		
7. 50%.	7		
8. Total (Include Interest and Penalty if Due).	8		

Name

And

Address

Tax Year 2026

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 31, 2027

MAKE CHECK OR MONEY ORDER TO:
VILLAGE OF HICKSVILLE
111 S MAIN ST
HICKSVILLE OH 43526-1398

Voice 419-542-8621 Ext Fax 419-542-2018

Period Ending OCT-NOV-DEC

TAX ID

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