

CITY OF NAPOLEON Estimated Tax – 2005

1

FOR CALENDAR YEAR 2005 OR FISCAL YEAR _____

CITY OF _____ NAME OF EMPLOYER
RESIDENCE _____ OR TYPE BUSINESS _____

S.S.#/FED. I.D.# _____

PAYMENT NO. 1 DUE APRIL 15, 2005
OR FISCAL DATE _____

Estimated Tax
For The
Year Ending _____ (A) \$ _____
(Line 3 of Worksheet)

Amount Due This Quarter (B) \$ _____

Less Unused Overpayment (C) \$ (_____)

Amount of This Payment (D) \$ _____

Taxpayer's Signature _____ Date _____

MAKE CHECK OR MONEY ORDER PAYABLE TO:
CITY OF NAPOLEON, OHIO – INCOME TAX
419-599-2821
MAIL TO: INCOME TAX DEPARTMENT
255 W. RIVERVIEW AVE.
P.O. BOX 151
NAPOLEON, OHIO 43545-0151

CITY OF NAPOLEON Estimated Tax – 2005

2

FOR CALENDAR YEAR 2005 OR FISCAL YEAR _____

CITY OF _____ NAME OF EMPLOYER
RESIDENCE _____ OR TYPE BUSINESS _____

S.S.#/FED. I.D.# _____

PAYMENT NO. 2 DUE JULY 31, 2005
OR FISCAL DATE _____

Estimated Tax
For The
Year Ending _____ (A) \$ _____

Amount Due This Quarter (B) \$ _____

Less Unused Overpayment (C) \$ (_____)

Amount of This Payment (D) \$ _____

Taxpayer's Signature _____ Date _____

MAKE CHECK OR MONEY ORDER PAYABLE TO:
CITY OF NAPOLEON, OHIO – INCOME TAX
419-599-2821
MAIL TO: INCOME TAX DEPARTMENT
255 W. RIVERVIEW AVE.
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3

FOR CALENDAR YEAR 2005 OR FISCAL YEAR _____

CITY OF _____ NAME OF EMPLOYER
RESIDENCE _____ OR TYPE BUSINESS _____

S.S.#/FED. I.D.# _____

PAYMENT NO. 3 DUE OCT. 31, 2005
OR FISCAL DATE _____

Estimated Tax
For The
Year Ending _____ (A) \$ _____

Amount Due This Quarter (B) \$ _____

Less Unused Overpayment (C) \$ (_____)

Amount of This Payment (D) \$ _____

Taxpayer's Signature _____ Date _____

MAKE CHECK OR MONEY ORDER PAYABLE TO:
CITY OF NAPOLEON, OHIO – INCOME TAX
419-599-2821
MAIL TO: INCOME TAX DEPARTMENT
255 W. RIVERVIEW AVE.
P.O. BOX 151
NAPOLEON, OHIO 43545-0151

CITY OF NAPOLEON Estimated Tax – 2005

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FOR CALENDAR YEAR 2005 OR FISCAL YEAR _____

CITY OF _____ NAME OF EMPLOYER
RESIDENCE _____ OR TYPE BUSINESS _____

S.S.#/FED. I.D.# _____

PAYMENT NO. 4 DUE JANUARY 31, 2006
OR FISCAL DATE _____

Estimated Tax
For The
Year Ending _____ (A) \$ _____

Amount Due This Quarter (B) \$ _____

Less Unused Overpayment (C) \$ (_____)

Amount of This Payment (D) \$ _____

Taxpayer's Signature _____ Date _____

MAKE CHECK OR MONEY ORDER PAYABLE TO:
CITY OF NAPOLEON, OHIO – INCOME TAX
419-599-2821
MAIL TO: INCOME TAX DEPARTMENT
255 W. RIVERVIEW AVE.
P.O. BOX 151
NAPOLEON, OHIO 43545-0151