

**CITY OF CAMBRIDGE**  
INCOME TAX DEPARTMENT  
828 WHEELING AVENUE  
CAMBRIDGE, OHIO 43725-2596  
(740) 439-2355

**Forms W-1 (Monthly Statement)**  
**Form W-3 (Annual Reconciliation)**

**IMPORTANT**

**2021 EMPLOYER'S MUNICIPAL INCOME TAX WITHHOLDING FORMS**

*This packet contains withholding  
tax forms you are required to file.*

The rate for 2021 is 2% (.02)

**PLEASE DO NOT DESTROY –  
IMPORTANT TAX FORMS**

**NOTE: TAX RATE CHANGE TO 2.0% EFFECTIVE 1/1/2010**

Dear Employer:

This is your 2021 Employer's Monthly Return of Tax Withheld package. Included are 12 Monthly forms for your filing requirement. We have also included the Employer Reconciliation of Income Tax Withheld for 2021. **These will not be sent each month. Please keep for further payments.**

If you have any questions regarding the below forms, please contact us at 828 Wheeling Avenue, Cambridge, Ohio 43725-2596. If you wish to contact by telephone, our number is (740) 439-2355. These forms are also available on-line at [www.cambridgeoh.org](http://www.cambridgeoh.org) click on the City Government/Treasurer's Link.

Sincerely,

INCOME TAX ADMINISTRATOR

FORM W-1 EMPLOYER'S RETURN OF TAX WITHHELD

CITY OF CAMBRIDGE  
INCOME TAX DEPARTMENT  
828 WHEELING AVENUE  
CAMBRIDGE, OHIO 43725-2596  
TELEPHONE (740) 439-2355

2021

FOR MONTHLY PERIOD  
JANUARY 31, 2021

DUE ON OR BEFORE  
FEBRUARY 15, 2021

ACCT. # \_\_\_\_\_ FID # \_\_\_\_\_

NAME AND ADDRESS

- 1. Total wages subject to Cambridge Tax.....\$ \_\_\_\_\_
- 2. Cambridge taxes due @ 2.0%.....\$ \_\_\_\_\_
- 3. Adjustment to prior return.....\$ \_\_\_\_\_
- 4. Penalty.....\$ \_\_\_\_\_
- 5. Interest.....\$ \_\_\_\_\_
- 6. Total Balance/Due.....\$ \_\_\_\_\_
- 7. Amount Paid.....\$ \_\_\_\_\_

Is this a courtesy withholding?  Yes

Is this a final return?..... Yes  No

If yes, attach explanation

Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Phone # \_\_\_\_\_

*I hereby certify that the information and statements herein are true and correct.*

FORM W-1 **EMPLOYER'S RETURN OF TAX WITHHELD**  
**CITY OF CAMBRIDGE**  
**INCOME TAX DEPARTMENT**  
**828 WHEELING AVENUE**  
**CAMBRIDGE, OHIO 43725-2596**  
**TELEPHONE (740) 439-2355**

**2021**

FOR MONTHLY PERIOD  
**FEBRUARY 28, 2021**

DUE ON OR BEFORE  
**MARCH 15, 2021**

ACCT. # \_\_\_\_\_ FID # \_\_\_\_\_

NAME AND ADDRESS

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Phone # \_\_\_\_\_

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**CITY OF CAMBRIDGE  
INCOME TAX DEPARTMENT  
828 WHEELING AVENUE  
CAMBRIDGE, OHIO 43725-2596  
TELEPHONE (740) 439-2355**

**2021**

FOR MONTHLY PERIOD  
**MARCH 31, 2021**

DUE ON OR BEFORE  
**APRIL 15, 2021**

ACCT. # \_\_\_\_\_ FID # \_\_\_\_\_

NAME AND ADDRESS

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CITY OF CAMBRIDGE  
INCOME TAX DEPARTMENT  
828 WHEELING AVENUE  
CAMBRIDGE, OHIO 43725-2596  
TELEPHONE (740) 439-2355

2021

FOR MONTHLY PERIOD  
APRIL 30, 2021

DUE ON OR BEFORE  
MAY 15, 2021

ACCT. # \_\_\_\_\_ FID # \_\_\_\_\_

NAME AND ADDRESS

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828 WHEELING AVENUE  
CAMBRIDGE, OHIO 43725-2596  
TELEPHONE (740) 439-2355**

**2021**

FOR MONTHLY PERIOD  
**MAY 31, 2021**

DUE ON OR BEFORE  
**JUNE 15, 2021**

ACCT. # \_\_\_\_\_ FID # \_\_\_\_\_

NAME AND ADDRESS

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- 2. Cambridge taxes due @ 2.0%.....\$ \_\_\_\_\_
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Phone # \_\_\_\_\_

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**CITY OF CAMBRIDGE  
INCOME TAX DEPARTMENT  
828 WHEELING AVENUE  
CAMBRIDGE, OHIO 43725-2596  
TELEPHONE (740) 439-2355**

**2021**

FOR MONTHLY PERIOD  
**JUNE 30, 2021**

DUE ON OR BEFORE  
**JULY 15, 2021**

ACCT. # \_\_\_\_\_ FID # \_\_\_\_\_

NAME AND ADDRESS

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Phone # \_\_\_\_\_



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CITY OF CAMBRIDGE  
INCOME TAX DEPARTMENT  
828 WHEELING AVENUE  
CAMBRIDGE, OHIO 43725-2596  
TELEPHONE (740) 439-2355

2021

FOR MONTHLY PERIOD  
JULY 31, 2021

DUE ON OR BEFORE  
AUGUST 15, 2021

ACCT. # \_\_\_\_\_ FID # \_\_\_\_\_

NAME AND ADDRESS

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- 2. Cambridge taxes due @ 2.0%.....\$ \_\_\_\_\_
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Phone # \_\_\_\_\_

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CITY OF CAMBRIDGE  
INCOME TAX DEPARTMENT  
828 WHEELING AVENUE  
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TELEPHONE (740) 439-2355

2021

FOR MONTHLY PERIOD  
AUGUST 31, 2021

DUE ON OR BEFORE  
SEPTEMBER 15, 2021

ACCT. # \_\_\_\_\_ FID # \_\_\_\_\_

NAME AND ADDRESS

- 1. Total wages subject to Cambridge Tax.....\$ \_\_\_\_\_
- 2. Cambridge taxes due @ 2.0%.....\$ \_\_\_\_\_
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Phone # \_\_\_\_\_

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**CITY OF CAMBRIDGE  
INCOME TAX DEPARTMENT  
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TELEPHONE (740) 439-2355**

**2021**

FOR MONTHLY PERIOD  
**SEPTEMBER 30, 2021**

DUE ON OR BEFORE  
**OCTOBER 15, 2021**

ACCT. # \_\_\_\_\_ FID # \_\_\_\_\_

NAME AND ADDRESS

- 1. Total wages subject to Cambridge Tax.....\$ \_\_\_\_\_
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CITY OF CAMBRIDGE  
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TELEPHONE (740) 439-2355

2021

FOR MONTHLY PERIOD  
**OCTOBER 31, 2021**

DUE ON OR BEFORE  
**NOVEMBER 15, 2021**

ACCT. # \_\_\_\_\_ FID # \_\_\_\_\_

NAME AND ADDRESS

- 1. Total wages subject to Cambridge Tax.....\$ \_\_\_\_\_
- 2. Cambridge taxes due @ 2.0%.....\$ \_\_\_\_\_
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Phone # \_\_\_\_\_

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**2021**

FOR MONTHLY PERIOD  
**NOVEMBER 30, 2021**

DUE ON OR BEFORE  
**DECEMBER 15, 2021**

ACCT. # \_\_\_\_\_ FID # \_\_\_\_\_

NAME AND ADDRESS

- 1. Total wages subject to Cambridge Tax.....\$ \_\_\_\_\_
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**2021**

FOR MONTHLY PERIOD  
**DECEMBER 31, 2021**

DUE ON OR BEFORE  
**JANUARY 15, 2022**

ACCT. # \_\_\_\_\_ FID # \_\_\_\_\_

NAME AND ADDRESS

- 1. Total wages subject to Cambridge Tax.....\$ \_\_\_\_\_
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Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Phone # \_\_\_\_\_

- 1. Total number of employees.....
- 2. Total payroll subject to tax.....\$
- 3. Withholding tax liability at .020 of line 2.....\$
- 4. Total remitted for the year (brought over from line 5)\$

**PAYMENT SUMMARY**

- 5. Total remitted for the year.....\$
- 6. Overpayment \$\_\_\_\_\_or additional tax due \$\_\_\_\_\_

No taxes or refunds of less than \$10.00 shall be collected or refunded

ACCT. # \_\_\_\_\_

NAME AND ADDRESS

JANUARY	APRIL	JULY	OCTOBER
FEBRUARY	MAY	AUGUST	NOVEMBER
MARCH	JUNE	SEPTEMBER	DECEMBER

PAYMENT ENCLOSED

REFUND REQUESTED

**COPIES OF ALL 1099'S ISSUED AND W2'S MUST BE ATTACHED TO THIS FORM AND RETURNED BY FEBRUARY 28**

If additional tax is due, enclose payment with return

Submitted by \_\_\_\_\_ Date \_\_\_\_\_

Official Title \_\_\_\_\_

Federal ID no. \_\_\_\_\_

Phone # \_\_\_\_\_

**WITHHOLDING TAX WORKSHEET**

(Keep for your records – DO NOT FILE)

<b>Month Ending</b>	<b>Payment Date</b>	<b>Check Number</b>	<b>Date</b>	<b>Amount Paid</b>	<b>Month Ending</b>	<b>Payment Date</b>	<b>Check Number</b>	<b>Date</b>	<b>Amount Paid</b>
1/31	2/15	_____	_____	_____ -	7/31	8/15	_____	_____	_____
2/28	3/15	_____	_____	_____ -	8/31	9/15	_____	_____	_____
3/31	4/15	_____	_____	_____ -	9/30	10/15	_____	_____	_____
4/30	5/15	_____	_____	_____ -	10/31	11/15	_____	_____	_____
5/31	6/15	_____	_____	_____	11/30	12/15	_____	_____	_____
6/30	7/15	_____	_____	_____	12/31	1/15	_____	_____	_____