



Founded 1790

City of Gallipolis

INCOME TAX DEPARTMENT

P O BOX 339
GALLIPOLIS, OHIO 45631

Telephone (740) 441-6009
Facsimile (740) 441-2062
Email citytax@gallinet.net

WITHHOLDING QUESTIONNAIRE

For the purpose of establishing and/or updating our records with regard to the Gallipolis Income Tax Withholding, please complete and return within ten days . Be sure to type or print plainly and answer all questions . Thank you .

Gallipolis name & address used for business

If above is a branch office, list name & address of main office :

Date the business first employed workers in Gallipolis : _____

Type of ownership : _____ Proprietorship _____ Partnership _____ LLC _____ Corporation
_____ OTHER Explain _____

Amount of withholding monthly : _____ under \$ 100.00 _____ over \$ 100.00

Are you a seasonal employer ? _____ YES _____ NO

Please list below Where to send the Employer Withholding Forms :

Business Name _____

Attention : _____

Mailing Address _____

Telephone _____ FAX _____

Federal ID # _____

I do hereby certify that the above information is correct and true .

X _____ Date _____