

**Sylvania Township/City of Sylvania JEDD I**

**January 2024 Withholding Payment**

Date Due February 15, 2024

Account # \_\_\_\_\_  
Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_

Federal Id \_\_\_\_\_

Payment Amount \$

Mail to: Sylvania Township/City of Sylvania JEDD I  
6730 Monroe St Ste 202  
Sylvania, OH 43560

\_\_\_\_\_  
Taxpayer signature Date

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**Sylvania Township/City of Sylvania JEDD I**

**February 2024 Withholding Payment**

Date Due March 15, 2024

Account # \_\_\_\_\_  
Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_

Federal Id \_\_\_\_\_

Payment Amount \$

Mail to: Sylvania Township/City of Sylvania JEDD I  
6730 Monroe St Ste 202  
Sylvania, OH 43560

\_\_\_\_\_  
Taxpayer signature Date

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**Sylvania Township/City of Sylvania JEDD I**

**March 2024 Withholding Payment**

Date Due April 15, 2024

Account # \_\_\_\_\_  
Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_

Federal Id \_\_\_\_\_

Payment Amount \$

Mail to: Sylvania Township/City of Sylvania JEDD I  
6730 Monroe St Ste 202  
Sylvania, OH 43560

\_\_\_\_\_  
Taxpayer signature Date

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**Sylvania Township/City of Sylvania JEDD I**

**April 2024 Withholding Payment**

Date Due May 15, 2024

Account # \_\_\_\_\_  
Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_

Federal Id \_\_\_\_\_

Payment Amount \$

Mail to: Sylvania Township/City of Sylvania JEDD I  
6730 Monroe St Ste 202  
Sylvania, OH 43560

\_\_\_\_\_  
Taxpayer signature Date

**Sylvania Township/City of Sylvania JEDD I**

**May 2024 Withholding Payment**

Date Due June 17, 2024

Account # \_\_\_\_\_  
Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_

Federal Id \_\_\_\_\_

Payment Amount \$

Mail to: Sylvania Township/City of Sylvania JEDD I  
6730 Monroe St Ste 202  
Sylvania, OH 43560

\_\_\_\_\_  
Taxpayer signature Date

**Sylvania Township/City of Sylvania JEDD I**

**June 2024 Withholding Payment**

Date Due July 15, 2024

Account # \_\_\_\_\_  
Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_

Federal Id \_\_\_\_\_

Payment Amount \$

Mail to: Sylvania Township/City of Sylvania JEDD I  
6730 Monroe St Ste 202  
Sylvania, OH 43560

\_\_\_\_\_  
Taxpayer signature Date

**Sylvania Township/City of Sylvania JEDD I**

**July 2024 Withholding Payment**

Date Due August 15, 2024

Account # \_\_\_\_\_  
Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_

Federal Id \_\_\_\_\_

Payment Amount \$

Mail to: Sylvania Township/City of Sylvania JEDD I  
6730 Monroe St Ste 202  
Sylvania, OH 43560

\_\_\_\_\_  
Taxpayer signature Date

**Sylvania Township/City of Sylvania JEDD I**

**August 2024 Withholding Payment**

Date Due September 16, 2024

Account # \_\_\_\_\_  
Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_

Federal Id \_\_\_\_\_

Payment Amount \$

Mail to: Sylvania Township/City of Sylvania JEDD I  
6730 Monroe St Ste 202  
Sylvania, OH 43560

\_\_\_\_\_  
Taxpayer signature Date

**Sylvania Township/City of Sylvania JEDD I**

**September 2024 Withholding Payment**

Date Due October 15, 2024

Account # \_\_\_\_\_  
Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_

Federal Id \_\_\_\_\_

Payment Amount \$

Mail to: Sylvania Township/City of Sylvania JEDD I  
6730 Monroe St Ste 202  
Sylvania, OH 43560

\_\_\_\_\_  
Taxpayer signature Date

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**Sylvania Township/City of Sylvania JEDD I**

**October 2024 Withholding Payment**

Date Due November 15, 2024

Account # \_\_\_\_\_  
Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_

Federal Id \_\_\_\_\_

Payment Amount \$

Mail to: Sylvania Township/City of Sylvania JEDD I  
6730 Monroe St Ste 202  
Sylvania, OH 43560

\_\_\_\_\_  
Taxpayer signature Date

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**Sylvania Township/City of Sylvania JEDD I**

**November 2024 Withholding Payment**

Date Due December 16, 2024

Account # \_\_\_\_\_  
Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_

Federal Id \_\_\_\_\_

Payment Amount \$

Mail to: Sylvania Township/City of Sylvania JEDD I  
6730 Monroe St Ste 202  
Sylvania, OH 43560

\_\_\_\_\_  
Taxpayer signature Date

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**Sylvania Township/City of Sylvania JEDD I**

**December 2024 Withholding Payment**

Date Due January 15, 2025

Account # \_\_\_\_\_  
Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_

Federal Id \_\_\_\_\_

Payment Amount \$

Mail to: Sylvania Township/City of Sylvania JEDD I  
6730 Monroe St Ste 202  
Sylvania, OH 43560

\_\_\_\_\_  
Taxpayer signature Date