

MAIL TO: CITY OF GENEVA
DIVISION OF TAXATION
44 NORTH FOREST STREET
GENEVA, OHIO 44041

Telephone: 440-466-3913

**CITY OF GENEVA
QUARTERLY ESTIMATED TAX
FOR TAX YEAR 2018**

ACCOUNT #: _____

Taxpayer's Name: _____

Tax Payer's Spouse: _____
(filing joint)

Address: _____

Telephone: _____

DUE DATES:

Individual Accounts:

1st Quarter: 04/15/2018 3rd Quarter: 9/15/2018

2nd Quarter: 06/15/2018 4th Quarter: 01/15/2019

Business Accounts:

1st Quarter: 04/15/2018 3rd Quarter: 09/15/2018

2nd Quarter 06/15/2018 4th Quarter: 12/15/2018

Individual Enter SS # **OR** Business Enter Fed ID #

Spouse SS # _____

\$ _____

AMOUNT OF ESTIMATED PAYMENT:

PLEASE MAKE CHECKS PAYABLE TO:

CITY OF GENEVA INCOME TAX