



SCHOOL DISTRICT INCOME TAX

Employee Name _____ Social Security # _____

School District you reside in _____ School District # _____

Additional withholding per pay period under agreement with employer \$_____.



FAIRFIELD COUNTY (PHONE: 653-3193)

Amanda Clearcreek LSD-----2301
 Berne Union LSD-----2302
 Bloom-Caroll LSD-----2303
 Fairfield Union LSD-----2304
 Lancaster CSD-----2305
 Liberty Union-Thurston LSD-----2306
 Pickerington LSD-----2307
 Walnut Township LSD-----2308

LICKING COUNTY (PHONE: 349-6000)

Granville Exempted Village SD-----4501
 Heath CSD-----4502
 Johnstown-Monroe LSD-----4503
 Lakewood LSD-----4504
 Licking Heights LSD-----4505
 Licking Valley LSD-----4506
 Newark CSD-----4507
 North Fork LSD-----4508
 Northridge LSD-----4509
 Southwest Licking LSD-----4510

FRANKLIN COUNTY (PHONE 455-3750)

Bexley CSD-----2501
 Canal Winchester LSD-----2502
 Columbus CSD-----2503
 Dublin LSD-----2513
 Gahanna-Jefferson CSD-----2506
 Grandview Heights CSD-----2504
 Groveport-Madison LSD-----2507
 Hamilton LSD-----2505
 Hillard CSD-----2510
 Plain LSD-----2508
 Reynoldsburg CSD-----2509
 South-Western CSD-----2511
 UpperArlington CSD-----2512
 Westerville CSD-----2514
 Whitehall CSD-----2515
 Worthington CSD-----2516

PERRY COUNTY (PHONE 342-3502)

Crooksville Exempted Village SD-----6401
 New Lexington CSD-----6402
 Northern LSD-----6403
 Southern LSD-----6404

If your county of resident or school district is not listed, please obtain your school district I.D. number from the State Department of Taxation and/or County Court House and enter it in the appropriate blank.

Signature: _____

Date: _____