



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: _____