

DARKE COUNTY EDUCATIONAL SERVICE CENTER

**PUBLIC SCHOOL DISTRICT OF RESIDENCE
EMPLOYEE WITHHOLDING CERTIFICATE**

We are required by Ohio Law (R.C. 5747.06 E) to ask all employees for their Public School District of residence.

Please complete and return to the Treasurer's Office as soon as possible.

NAME _____

ADDRESS _____

SOCIAL SECURITY # _____

PUBLIC SCHOOL DISTRICT OF RESIDENCE _____

Signature of Employee

Date