

VILLAGE OF NORTH KINGSVILLE
EMPLOYER'S RECONCILIATION OF TAX WITHHELD

FOR THE YEAR _____ DUE ON OR BEFORE 02/28/_____
XX

- 1. Total Number of Taxable employees _____
- 2. Total Salaries, Wages, Commissions and Other Compensation paid to all employees
 (Before and Deductions or Reductions). _____
- 3. TOTAL TAXABLE EARNINGS _____

Monthly / Quarterly Breakdowns of Withholding Taxes Paid

- 4. JAN _____ APR _____ JUL _____ OCT _____
 FEB _____ MAY _____ AUG _____ NOV _____
 MAR _____ JUN _____ SEP _____ DEC _____
 1 QT _____ 2 QT _____ 3QT _____ 4 QT _____

- 5. Interest _____
- 6. Penalty _____
- 7. Actual Amount paid for Year _____
- 8. Total Amount Due _____
- 9. Difference - Items 7 and 8 should be identical

If different, show amount and fully explain on reverse side _____
XX

I hereby certify that the information and statements
contained herein are true and correct. (Signature) _____

THIS RETURN MUST BE FILED (Official Title) _____

ON OR BEFORE THE DUE DATE
AS SHOWN AT THE TOP OF FORM (Date) _____

XX

COPIES OF W-2 FORMS MUST BE SUBMITTED WITH THIS FORM

Information required to be submitted with this report is 1) Name and Address of Employee; 2) Social Security Number; 3) Gross Earnings paid before any deductions or reductions; 4) Amount of North Kingsville Village Tax Withheld.
Reproduced copies of Federal Forms W-2 or typed-written lists will be accepted.

Notify Tax Department promptly of any change in information below.

RETURN SIGNED COPY

Federal ID #
Name &
Address

Mail to: Village of North Kingsville Tax Dept.
PO Box 253
North Kingsville, OH 44068

Phone: (440)224-1924