

Village of Millersburg  
Income Tax Department  
6 North Washington Street  
Millersburg, Ohio 44654 330-674-6891

**EMPLOYER'S QUARTERLY RETURN OF INCOME TAX WITHHELD**

Due on or Before **04/30/2015**  
For Period **JAN FEB MAR**  
Tax Year 2015

Notify Income Tax Department promptly of any change in ownership or name and address shown below.

**TAX RATE IS 1.5%**

Fed. ID # \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

- 1. Total Compensation Paid This Period \$ \_\_\_\_\_
- 2. Total Withheld This Period \$ \_\_\_\_\_
- 3. Adjustments to prior returns \$ \_\_\_\_\_
- 4. Penalty and/or Interest \$ \_\_\_\_\_
- 5. Total \$ \_\_\_\_\_

Make check or money order payable to:  
**Village of Millersburg**

I hereby certify that the information and statements contained herein are true and correct.

(signed) \_\_\_\_\_

(Official Title) \_\_\_\_\_

Date

Village of Millersburg  
Income Tax Department  
6 North Washington Street  
Millersburg, Ohio 44654 330-674-6891

**EMPLOYER'S QUARTERLY RETURN OF INCOME TAX WITHHELD**

Due on or Before **07/31/15**  
For Period **APR MAY JUN**  
Tax Year 2015

Notify Income Tax Department promptly of any change in ownership or name and address shown below.

**TAX RATE IS 1.5%**

Fed. ID # \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

- 1. Total Compensation Paid This Period \$ \_\_\_\_\_
- 2. Total Withheld This Period \$ \_\_\_\_\_
- 3. Adjustments to prior returns \$ \_\_\_\_\_
- 4. Penalty and/or Interest \$ \_\_\_\_\_
- 5. Total \$ \_\_\_\_\_

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(signed) \_\_\_\_\_

(Official Title) \_\_\_\_\_

Date

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Income Tax Department  
6 North Washington Street  
Millersburg, Ohio 44654 330-674-6891

**EMPLOYER'S QUARTERLY RETURN OF INCOME TAX WITHHELD**

Due on or Before **10/30/2015**  
For Period **JUL AUG SEP**  
Tax Year 2015

Notify Income Tax Department promptly of any change in ownership or name and address shown below.

**TAX RATE IS 1.5%**

Fed. ID # \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

- 1. Total Compensation Paid This Period \$ \_\_\_\_\_
- 2. Total Withheld This Period \$ \_\_\_\_\_
- 3. Adjustments to prior returns \$ \_\_\_\_\_
- 4. Penalty and/or Interest \$ \_\_\_\_\_
- 5. Total \$ \_\_\_\_\_

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**Village of Millersburg**

I hereby certify that the information and statements contained herein are true and correct.

(signed) \_\_\_\_\_

(Official Title) \_\_\_\_\_

Date

Village of Millersburg  
Income Tax Department  
6 North Washington Street  
Millersburg, Ohio 44654

**EMPLOYER'S QUARTERLY RETURN OF INCOME TAX WITHHELD**

Due on or Before 01/31/2016  
For Period OCT NOV DEC  
Tax Year 2015

Notify Income Tax Department promptly of any change in ownership or name and address shown below.

**TAX RATE IS 1.5%**

Fed. ID # \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

- 1. Total Compensation Paid This Period \$ \_\_\_\_\_
- 2. Total Withheld This Period \$ \_\_\_\_\_
- 3. Adjustments to prior returns \$ \_\_\_\_\_
- 4. Penalty and/or Interest \$ \_\_\_\_\_
- 5. Total \$ \_\_\_\_\_

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(signed) \_\_\_\_\_

(Official Title) \_\_\_\_\_

Date

**WITHHOLDING TAX RECONCILIATION**

Village of Millersburg  
6 North Washington Street  
Millersburg, Ohio 44654

1. Total Number of employees as represented by Forms W-2 submitted herewith \_\_\_\_\_

2. Total Income Tax Withheld from compensation Paid all employees \$ \_\_\_\_\_

Fed. ID # \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

**LEGIBLE COPIES OF W-2 FORMS MUST ACCOMPANY THIS FORM BY JAN 31<sup>ST</sup>**

3. Total Income Tax Withheld from compensation during 2015 for:

1<sup>st</sup> Quarter ending March 31<sup>st</sup> \$ \_\_\_\_\_

2<sup>nd</sup> Quarter ending June 30<sup>th</sup> \$ \_\_\_\_\_

3<sup>rd</sup> Quarter ending September 30 \$ \_\_\_\_\_

4<sup>th</sup> Quarter ending December 31 \$ \_\_\_\_\_

4. Total Amount Withheld \_\_\_\_\_

Parts 2 and 4 should be identical, explain fully any discrepancy.