## Village of Millersburg

## 2023 EMPLOYER'S QUARTERLY RETURN OF INCOME TAX WITHHELD

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

Address:

| Income Tax Department 6 North Washington Street Milershurg, Obje 44654, 230,674,6901                        |   |  | or Before 04/30/2023<br>eriod JAN FEB MAR                                  |
|---|---|--|--|
| Millersburg, Ohio 44654 330-674-6891  |   |  | Tax Year 2023  |
| Notify Income Tax Department promptly of any change in ownership or name and address shown below.           | 1.  | Total Compensation Paid This Perio                           |  |
| addiose silemi polen.   | 2.  | Total Withheld This Period                                   | \$   |
| TAX RATE IS 1.5%  | 3.  | Adjustments to prior returns                                 | \$   |
|   | 4.  | Penalty and/or Interest                                      | \$   |
| Fed. ID #   | 5.  | Total  | \$   |
| Name:   | Mak   | e check or money order payable to: Village of Millersburg    |  |
|   | I hereby certify that the information and statements contained herein are true and correct. |  |  |
|   | (signed)  |  |  |
| Address:  | (Officia  | l Title)   |  |
|   |   |  | Date   |
| Village of Millersburg Income Tax Department 6 North Washington Street Millersburg, Ohio 44654 330-674-6891 | QUART   |  | TAX WITHHELD<br>or Before 07/31/2023<br>eriod APR MAY JUN<br>Tax Year 2023 |
| Notify Income Tax Department promptly of any change in ownership or name and                                | 1.  | Total Compensation Paid This Perio                           |  |
| address shown below.  | 2.  | Total Withheld This Period                                   | \$   |
| THAT THAT IS 4 FO   | 3.  | Adjustments to prior returns                                 | \$   |
| TAX RATE IS 1.5%  | 4.  | Penalty and/or Interest                                      | \$   |
|   |   |  | \$<br>\$   |
|   | 5.  | Total  | 2  |
| Fed. ID #   | Mak   | e check or money order payable to:<br>Village of Millersburg |  |
| Name:   | I hereby ce   | rtify that the information and statements contained          | I herein are true and correct.   |
|   | (signed)  |  |  |
|   | (Officia  | l Title)   |  |
| Address:  | (Officia  | 1 Title)   | Date   |
| rudioss.  |   |  |  |
|   |   |  |  |
| Village of Millersburg 2023 EMPLOYER'S Income Tax Department  | QUART   | ERLY RETURN OF INCOME  | TAX WITHHELD or Before 10/31/2023  |
| 6 North Washington Street<br>Millersburg, Ohio 44654 330-674-6891   |   |  | eriod JUL AUG SEP<br>Tax Year 2023   |
| Notify Income Tax Department promptly of any change in ownership or name and                                | 1.  | Total Compensation Paid This Perio                           | od \$  |
| address shown below.  | 2.  | Total Withheld This Period                                   | \$   |
| TAX RATE IS 1.5%  | 3.  | Adjustments to prior returns                                 | \$   |
| 1AA RATE IS 1.5 /0  | 4.  | Penalty and/or Interest                                      | \$   |
| Fed. ID #   | 5.  | Total  | \$   |
|   | _   | e check or money order payable to:  Village of Millersburg   | Ψ  |
| Name:   | I hereby ce   | rtify that the information and statements contained          | I herein are true and correct.   |
|   | ,   |  |  |

Date

## Village of Millersburg

2023 EMPLOYER'S QUARTERLY RETURN OF INCOME TAX WITHHELD

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

Income Tax Department 6 North Washington Street Millersburg, Ohio 44654

Due on or Before 01/31/2024

| For | Period | OCT   | NOV | DEC  |
|-----|--------|-------|-----|------|
|     |        | Tay Y | V   | 2022 |

Tax Year 2023 Notify Income Tax Department promptly of any change in ownership or name and Total Compensation Paid This Period 1. address shown below. Total Withheld This Period Adjustments to prior returns 3. **TAX RATE IS 1.5%** 4. Penalty and/or Interest Fed. ID # \_\_\_\_\_ 5. Total Make check or money order payable to: Village of Millersburg Name: \_\_\_\_\_ I hereby certify that the information and statements contained herein are true and correct. (signed)\_\_\_\_ Address: \_\_\_\_\_ (Official Title) \_\_\_\_\_ Date 2023 WITHHOLDING TAX RECONCILIATION **LEGIBLE COPIES OF W-2 FORMS MUST ACCOMPANY THIS FORM BY FEB 28, 2024** Village of Millersburg 6 North Washington Street Millersburg, Ohio 44654 1. Total Number of employees as represented by 3. Total Income Tax Withheld from compensation during Forms W-2 submitted herewith **2023** for: 1st Quarter ending March 31st 2. Total Income Tax Withheld from compensation paid all employees \$ \_\_\_\_\_ 2<sup>nd</sup> Quarter ending June 30<sup>th</sup> \$ \_\_\_\_\_ Fed. ID # \_\_\_\_\_ 3<sup>rd</sup> Quarter ending September 30 Name: 4th Quarter ending December 31 **4.** Total Amount Withheld Address: \_\_\_\_\_