2017 EMPLOYER'S QUARTERLY RETURN OF INCOME TAX WITHHELD

Village of Millersburg Income Tax Department

Address: _____

Due on or Before 04/15/2017

For	Period	JAN	FEB	MAR
		_		

6 North Washington Street Millersburg, Ohio 44654 330-674-6891		For Peri	iod JAN FEB MAF
Notify Income Tax Department promptly of any change in ownership or name and	1.	Total Compensation Paid This Period	\$
address shown below.	2.	Total Withheld This Period	\$
TAX RATE IS 1.5%	3.	Adjustments to prior returns	\$
1111 HILL 10 110 / 0	4.	Penalty and/or Interest	\$
Fed. ID #	5.	Total	\$
Name:	Mak	e check or money order payable to: Village of Millersburg	
	I hereby ce	rtify that the information and statements contained he	erein are true and correc
	(signed)		
Address:	(Officia	1 Title)	
			Dat
Village of Millersburg Income Tax Department 6 North Washington Street Millersburg, Ohio 44654 330-674-6891	QUART		AX WITHHELD or Before 07/15/1 od APR MAY JUI Tax Year 2017
Notify Income Tax Department promptly of any change in ownership or name and	1.	Total Compensation Paid This Period	\$
address shown below.	2.	Total Withheld This Period	\$ \$
	3.		\$ \$
TAX RATE IS 1.5%		Adjustments to prior returns Penalty and/or Interest	\$ \$
	4.		\$ \$
E. 1 ID #	5.	Total	\$
Fed. ID #	iviak	e check or money order payable to: Village of Millersburg	
Name:	I hereby ce	rtify that the information and statements contained he	erein are true and correc
	(signed)		
	(Officia	1 Title)	
Address:			Da
Village of Millersburg Income Tax Department 6 North Washington Street Millersburg, Ohio 44654 330-674-6891	QUART		AX WITHHELI Before 10/15/201 iod JUL AUG SEI Tax Year 2017
Notify Income Tax Department promptly of any change in ownership or name and	1.	Total Compensation Paid This Period	\$
address shown below.	2.	Total Withheld This Period	\$
TAX RATE IS 1.5%	3.	Adjustments to prior returns	\$
2.2.2 2.2.2 2.0 2.0 /V	4.	Penalty and/or Interest	\$
Fed. ID #	5.	Total	\$
	Mak	e check or money order payable to: Village of Millersburg	
Name:	I hereby ce	rtify that the information and statements contained he	erein are true and correc
	(signed)		

Date

(Official Title) _____

2017 EMPLOYER'S QUARTERLY RETURN OF INCOME TAX WITHHELD

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

Due on or Before 01/15/2018 For Period OCT NOV DEC

Tax Year 2017

Notify Income Tax Department promptly of any change in ownership or name an address shown below.	nd 1.	Total Compensation Paid This Period	\$
address shown below.	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 ce	ertify that the information and statements contained he	rein are true and correct.
	(signed)		
Address:	(Officia	l Title)	
	(01110111	. 1100)	Date
	LEGIBLE COPIES OF W-2 FORMS MUST ACCOMPANY THIS FORM BY FEB 28, 2018		
Total Number of employees as represented by Forms W-2 submitted herewith	3. Total Inc 2017 for	come Tax Withheld from comper :	nsation during
2. Total Income Tax Withheld from compensation	1 st	Quarter ending March 31st	\$
paid all employees \$	2 ^{no}	^d Quarter ending June 30 th	\$
Fed. ID #	Ord	Overter anding Contember 20	\$
Namo	3''	Quarter ending September 30	Ф
Name:	4 th	Quarter ending December 31	\$
Address:	4. Total An	nount Withheld	
	Section 2 an	d 4 should be identical, explain fully a	any discrepancy.