

Village of Valley Hi

325 North Main Street
Bellefontaine, OH 43311

Enclosed are blank forms for the Village of Valley Hi Employer Withholding and Reconciliation.

The annual reconciliation is due on or before the last day of January each year. If you are a monthly filer, the withholding forms and payments are due by the 15th of the month immediately following the end of the month. If you are a quarterly filer, the quarterly withholding forms and payments are due by the 31st of the month immediately following the end of the quarter (see schedule below):

- January due February 15th
 - February due March 15th
 - March due April 15th
 - April due May 15th
 - May due June 15th
 - June due July 15th
 - July due August 15th
 - August due September 15th
 - September due October 15th
 - October due November 15th
 - November due December 15th
 - December due January 15th
-
- Jan-Feb-Mar due April 30th
 - Apr-May-June due July 31st
 - July-Aug-Sept due October 31st
 - Oct-Nov-Dec due January 31st

All questions should be directed to the office of D. William Boy CPA at 937-592-6610.

Tax Year 20__

FORM W3 1067
EMPLOYER'S
WITHHOLDING
RECONCILIATION

VILLAGE OF VALLEY HI
325 N MAIN ST
BELLEFONTAINE OH 43311

Voice 937-592-6610 Fax 888-233-6435

DUE DATE 02/28/20__

Name
And
Address

FEDERAL ID NUMBER

NAME OF PERSON
COMPLETING FORM

LOCAL PHONE NUMBER

NUMBER OF EMPLOYEES LISTED _____

EMPLOYEE W2'S MUST ACCOMPANY THIS FORM

INSTRUCTIONS

1. Attach check payable to The Village of Valley Hi, for difference if withholding exceeds remittance.
2. If remittance exceeds amount withheld, give explanation and request refund below.
3. Attach explanation if column 2 is used.

ENTER PAYROLL BY QUARTERLY OR MONTHLY TOTALS

Period	(1) Gross Payroll	(2) Payroll Not Subject to Tax	(3) Payroll Subject to Tax	(4) Tax Due	(5) Tax Paid Per Your Records
January	_____	_____	_____	_____	_____
February	_____	_____	_____	_____	_____
March/Qtr-	_____	_____	_____	_____	_____
1 April	_____	_____	_____	_____	_____
May	_____	_____	_____	_____	_____
June/Qtr-2	_____	_____	_____	_____	_____
July	_____	_____	_____	_____	_____
August	_____	_____	_____	_____	_____
September/Qtr-3	_____	_____	_____	_____	_____
October	_____	_____	_____	_____	_____
November	_____	_____	_____	_____	_____
December/Qtr-4	_____	_____	_____	_____	_____
TOTALS	_____	_____	_____	_____	_____

TOTAL REMITTANCE MADE

Employer - Explain any differences:

DIFFERENCE _____

	DOLLARS	CENTS
1. Taxable Earnings paid all Employees Subject to Village of Valley Hi, Ohio, 1% Income Tax.	\$	
2. Actual Tax withheld in month/quarter for city income tax.	\$	
3. Adjustment of tax for prior quarter (see instructions)		
4. Interest: _____		
5. Penalty _____		
6. Total % of line 1	\$	

FOR MONTHS OF
DUE ON OR BEFORE

Notify Income Tax Division promptly of any change in ownership or name and address shown above.

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

(Signed) _____
(Official Title) _____ Date _____

Federal ID No. _____

THIS RETURN MUST BE FILED
ON OR BEFORE THE DUE DATE SHOWN BELOW
MAKE CHECK OR MONEY ORDER PAYABLE TO
VILLAGE OF VALLEY HI INCOME TAX DIV.

MAIL TO:

Village of Valley Hi
Income Tax Dept.
325 North Main Street
Bellefontaine, OH 43311

If receipt is desired, return taxpayer's copy of this form
enclose self-addressed, stamped envelope.

VILLAGE OF VALLEY HI OHIO, EMPLOYER'S RETURN OF TAX WITHHELD

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