

Village of Westfield Center
Income Tax Department
P. O. Box 750
Westfield Center, OH 44251

EMPLOYER WITHHOLDING TAX RECONCILIATION

Due on or Before the last day of February of the Next Year

FOR TAX YEAR: _____

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

1. Total number of employees as represented on forms W-2 submitted herewith: _____

2. Total income tax withheld from Compensation paid all employees: \$ _____

Account Number # _____

Fed. ID # _____

Company Name & Address:

3. Total income tax withheld from compensation during:

January	\$ _____	
February	\$ _____	
March	\$ _____	
First Quarter Total		\$ _____
April	\$ _____	
May	\$ _____	
June	\$ _____	
Second Quarter total		\$ _____
July	\$ _____	
August	\$ _____	
September	\$ _____	
Third Quarter Total		\$ _____
October	\$ _____	
November	\$ _____	
December	\$ _____	
Fourth Quarter Total		\$ _____

4. Total for year \$ _____

Signature: _____

Official Title: _____

Date: _____