

If receipt is desired, return self-addressed stamped envelope with check

# VILLAGE OF MILLBURY EMPLOYER'S QUARTERLY RETURN OF TAX WITHHELD

Form **W-1**

I hereby certify that the information and statements contained herein and in any schedules or exhibits attached are true and correct.

(Signed) \_\_\_\_\_

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

Owner, Partner, Member, President, Treasurer, Agent. Date

THIS RETURN MUST BE FILED ON OR BEFORE  
DATE DUE AS SHOWN BELOW

(5 Part Form – each page dated)

PLEASE INSERT NAME AND ADDRESS

1. Actual Tax Withheld in quarter at 1 1/2% (\*)
2. Adjustment of Tax for prior quarter
3. Interest (1 1/2% PER MONTH)
4. Penalty (6% or \$50.00 Minimum PER MONTH)
5. Total (Include interest and penalty if due)

\$	
\$	
\$	
\$	
\$	

(\*) If no wages paid this quarter, mark "None" and return this form with explanation.

Mail To: COMMISSIONER OF TAXATION  
P.O. BOX 164  
MILLBURY, OHIO 43447

Make check or money order payable to:  
COMMISSIONER OF TAXATION  
VILLAGE OF MILLBURY