For the calendar year indicated or fiscal period beginning		, Millbury, Ohio Tax Rate - 1 1
To the calculat year indicated of fiscal period beginning	***************************************	20and ending20.
1. Total income subject to Millbury Tax	\$ \$	
(5 Part Form - each page dated)  *********  * PLEASE INSERT NAME AND ADDRESS*  *********************************		Address all correspondence concerning this form to:
		Commissioner of Taxation P.O. Box 164 Millbury, Ohio 43447
•		
a	X	
Notify tax office of any change in name or address shown.	Taxpayer or repr	resentative Date
or the calendar year indicated or fiscal period beginning	I Income Tax, N	Millbury, Ohio Tax Rate - 1 1/2 20and ending20
Total income subject to Millbury Tax Estimated Tax (1 1/2% of amount on line 1)	- \$ - \$	
Less Millbury Tax to be withheld \$		
Less other credits (specify) \$	<del></del>	
Less other credits (specify) \$  Total credits (total of lines 3, 4, 5, and 6)	<del></del>	Make check or money order payable to Village of Millbury, Income Tax
Less other credits (specify) \$  Total credits (total of lines 3, 4, 5, and 6)	\$	
Less other credits (specify) \$  Total credits (total of lines 3, 4, 5, and 6)	\$	Address all correspondence
Less other credits (specify) \$  Total credits (total of lines 3, 4, 5, and 6)	\$	Address all correspondence concerning this form to:  Commissioner of Taxation P.O. Box 164
Less other credits (specify) \$  Total credits (total of lines 3, 4, 5, and 6)	\$	Address all correspondence concerning this form to:  Commissioner of Taxation P.O. Box 164 Millbury, Ohio 43447

1. Total income subject to Millbury Tax	\$ \$	PAY TAX WHEN IT IS DUE. No reminder will be sent.  Make check or money order payable to
(5 Part Form - each page dated)	0 \$	Village of Millbury, Income Tax
* PLEASE INSERT NAME AND ADDRESS *  *********************************		Address all correspondence concerning this form to:
•		Commissioner of Taxation P.O. Box 164 Millbury, Ohio 43447
Notify tax office of any change in name or address shown.	X	
and address shown.	Taynavar or war	
Paris D ft.	Taxpayer or represent	Date
Form D-T  20 Declaration of Estimate  For the calendar year indicated or fiscal period beginning.  1. Total income subject to Millbury Tax 2. Estimated Tax (1 1/2% of amount on line 1) 3. Less Millbury Tax to be withheld 4. Previous payments if this is an amended dec. 5. Less credit paid other municipalities (1 % of wages) 6. Less other credits (specify) 7. Total credits (total of lines 3, 4, 5, and 6) 8. Net unpaid estimated Millbury Tax 9. Amount paid with this declaration (1/4 of line 8)  (5 Part Form - each page dated)  ***********************************	ed Income Tax, Mi 	Date

Taxpayer or representative

Date