

(419-492-2656)

VILLAGE OF NEW WASHINGTON, OHIO
Form EQR

EMPLOYER'S QUARTERLY RETURN OF TAX WITHHELD

Instructions on Reverse
side of Taxpayer's Copy

1.0 Percent

Dollars Cents

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

1. Taxable Earnings paid all Employees subject to
New Washington, Ohio, Village Income Tax.

\$

(Signed) _____

2. Actual Tax Withheld in quarter for Village Income Tax

\$

(Official Title) _____

3. Adjustment of Tax for prior quarter (see instructions)

Date

4. Interest _____

5. Total (include interest and penalty if due) _____

\$

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

**MAKE CHECK OR MONEY ORDER PAYABLE TO:
VILLAGE OF NEW WASHINGTON, OHIO—INCOME TAX**

FOR MONTHS OF

New Washington Income Tax Dept.
DUE ON OR BEFORE MAIL TO: P O Box 488

New Washington, OH 44854-0488

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

If receipt is desired, return Taxpayer's Copy of this
form and enclose self-addressed, stamped envelope.