

Village of Rockford
PO Box 282
151 E. Columbia St.
Rockford, Ohio 45882

EMPLOYER'S QUARTERLY RETURN OF INCOME TAX WITHHELD
Due on or Before 04/30/08
For Period JAN FEB MAR
Tax Year 2008

Notify Income Tax Department promptly of any changes in ownership or name and address shown below.

Account Number # _____
Fed. ID # _____

1. Total Compensation Paid this Period \$ _____
2. Total Withheld This Period \$ _____
Rockford tax rate 1%
3. Adjustments to Prior Returns \$ _____
4. Penalty and/or Interest \$ _____
5. Total \$ _____

Make check or money order payable to:
Village of Rockford

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

(Signed) _____

(Official Title) _____

Date

Village of Rockford
PO Box 282
151 E. Columbia St.
Rockford, Ohio 45882

EMPLOYER'S QUARTERLY RETURN OF INCOME TAX WITHHELD
Due on or Before 07/31/08
For Period APR MAY JUN
Tax Year 2008

Notify Income Tax Department promptly of any changes in ownership or name and address shown below.

Account Number # _____
Fed. ID # _____

1. Total Compensation Paid this Period \$ _____
2. Total Withheld This Period \$ _____
Rockford tax rate 1%
3. Adjustments to Prior Returns \$ _____
4. Penalty and/or Interest \$ _____
5. Total \$ _____

Make check or money order payable to:
Village of Rockford

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

(Signed) _____

(Official Title) _____

Date

Village of Rockford
PO Box 282
151 E. Columbia St.
Rockford, Ohio 45882

EMPLOYER'S QUARTERLY RETURN OF INCOME TAX WITHHELD
Due on or Before 10/31/08
For Period JUL AUG SEP
Tax Year 2008

Notify Income Tax Department promptly of any changes in ownership or name and address shown below.

Account Number # _____
Fed. ID # _____

1. Total Compensation Paid this Period \$ _____
2. Total Withheld This Period \$ _____
Rockford tax rate 1%
3. Adjustments to Prior Returns \$ _____
4. Penalty and/or Interest \$ _____
5. Total \$ _____

Make check or money order payable to:
Village of Rockford

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

(Signed) _____

(Official Title) _____

Date

Village of Rockford
PO Box 282
151 E. Columbia St.
Rockford, Ohio 45882

EMPLOYER'S QUARTERLY RETURN OF INCOME TAX WITHHELD
Due on or Before 01/31/09
For Period OCT NOV DEC
Tax Year 2008

Notify Income Tax Department promptly of any changes in ownership or name and address shown below.

Account Number # _____
Fed. ID # _____

1. Total Compensation Paid this Period \$ _____
2. Total Withheld This Period \$ _____
Rockford tax rate 1%
3. Adjustments to Prior Returns \$ _____
4. Penalty and/or Interest \$ _____
5. Total \$ _____

Make check or money order payable to:
Village of Rockford

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

(Signed) _____

(Official Title) _____

Date _____

WITHHOLDING TAX RECONCILIATION

Village of Rockford
PO Box 282
151 E. Columbia St.
Rockford, Ohio 45882

1. Total Number of employees as represented by Forms W-2 submitted herewith _____
2. Total Income Tax Withheld from Compensation Paid All Employees \$ _____

LEGIBLE COPIED OF W-2 FORMS MUST
ACCOMPANY THIS FORM BY JAN 31ST

3. Total Income Tax Withheld from compensation during 2008 for:

1st Quarter ending March 31st \$ _____

2nd Quarter ending June 30th \$ _____

3rd Quarter ending September 30th \$ _____

4th Quarter ending December 31st \$ _____

4. Total Amount Withheld \$ _____

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