Dear Employer:

This is your 2017 Employer's Monthly Return of Tax Withheld package. Included are all 12 monthly forms for your convenience. The monthly forms are due as so indicated. We have also included the Employer Reconciliation of Income Tax Withheld for 2017.

If you have any questions regarding your withholding forms, please contact the Village of Gibsonburg Income Tax Department at 526 N. Webster St., Gibsonburg, OH 43431. If you wish to contact by telephone, our number is (419) 637-6004.

Sincerely,

TAX COMMISSIONER

PLEASE NOTE: OUR ADDRESS WAS CHANGED TO: 526 N. WEBSTER ST., GIBSONBURG, OH 43431

. Taxable Earnings paid all Employees	DOLLARS	CENTS	I hereby certify that the information and statements	
subject to Village of Gibsonburg Income Tax	1.		contained herein are true and correct.	
Is this a courtesy withholding? ☐ YES				
Is this a final return? ☐ YES ☐ NO			(Signed)	
If yes, attach explanation			(Official Title) Date	
. Actual Tax Withheld in Village of Gibsonburg	2.		Federal ID no.	
. Adjustment of Tax for prior month				
Penalty (50% per month)			THIS RETURN MUST BE <u>RECEIVED</u> ON OR BEFORE THE DUE DATE SHOWN BELOW	
. Interest (.42% per month)			MAKE CHECK OR MONEY ORDER PAYABLE T	
Total – (Lines 2-5)			GIBSONBURG TAX DEPARTMENT	
AME AND ADDRESS FOR THE PERIOD ENDIN JANUARY MUST BE RECEIVED BY FEBRUARY 15, 2017		DD ENDING	INCOME TAX DEPARTMENT 526 N. WEBSTER STREET GIBSONBURG, OH 43431	
lotify the Income Tax Department promptly of any change in Ownership, N	MUST BE RECE FEBRUARY 15,		526 N. WEBSTER STREET GIBSONBURG, OH 43431 TELEPHONE (419) 637-6004 If receipt is desired, submit additional copy a	
otify the Income Tax Department promptly of any change in Ownership, N	MUST BE RECE FEBRUARY 15, ame or Address.	2017	INCOME TAX DEPARTMENT 526 N. WEBSTER STREET GIBSONBURG, OH 43431 TELEPHONE (419) 637-6004 If receipt is desired, submit additional copy a enclose self-addressed, stamped envelope.	
/ILLAGE OF GIBSONBURG EMPLOYER'S MONTHLY RETUI	MUST BE RECE FEBRUARY 15, ame or Address.	2017	526 N. WEBSTER STREET GIBSONBURG, OH 43431 TELEPHONE (419) 637-6004 If receipt is desired, submit additional copy all enclose self-addressed, stamped envelope.	
ILLAGE OF GIBSONBURG EMPLOYER'S MONTHLY RETUI	MUST BE RECE FEBRUARY 15, ame or Address. RN OF TAX WIT DOLLARS	2017 	526 N. WEBSTER STREET GIBSONBURG, OH 43431 TELEPHONE (419) 637-6004 If receipt is desired, submit additional copy a enclose self-addressed, stamped envelope.	
TILLAGE OF GIBSONBURG EMPLOYER'S MONTHLY RETUI Taxable Earnings paid all Employees subject to Village of Gibsonburg Income Tax	MUST BE RECE FEBRUARY 15, ame or Address. RN OF TAX WIT DOLLARS	2017 	526 N. WEBSTER STREET GIBSONBURG, OH 43431 TELEPHONE (419) 637-6004 If receipt is desired, submit additional copy a enclose self-addressed, stamped envelope D17	
ILLAGE OF GIBSONBURG EMPLOYER'S MONTHLY RETUI	MUST BE RECE FEBRUARY 15, ame or Address. RN OF TAX WIT DOLLARS	2017 	526 N. WEBSTER STREET GIBSONBURG, OH 43431 TELEPHONE (419) 637-6004 If receipt is desired, submit additional copy a enclose self-addressed, stamped envelope D17	
ILLAGE OF GIBSONBURG EMPLOYER'S MONTHLY RETURN TAXABLE Earnings paid all Employees subject to Village of Gibsonburg Income Tax	MUST BE RECE FEBRUARY 15, ame or Address. RN OF TAX WIT DOLLARS	2017 	526 N. WEBSTER STREET GIBSONBURG, OH 43431 TELEPHONE (419) 637-6004 If receipt is desired, submit additional copy a enclose self-addressed, stamped envelope. D17	
TILLAGE OF GIBSONBURG EMPLOYER'S MONTHLY RETUING. Taxable Earnings paid all Employees subject to Village of Gibsonburg Income Tax	MUST BE RECE FEBRUARY 15, ame or Address. RN OF TAX WIT DOLLARS 1.	2017 	526 N. WEBSTER STREET GIBSONBURG, OH 43431 TELEPHONE (419) 637-6004 If receipt is desired, submit additional copy a enclose self-addressed, stamped envelope D17	
ILLAGE OF GIBSONBURG EMPLOYER'S MONTHLY RETUI Taxable Earnings paid all Employees subject to Village of Gibsonburg Income Tax. Is this a courtesy withholding? ☐ YES Is this a final return? ☐ YES ☐ NO If yes, attach explanation Actual Tax Withheld in Village of Gibsonburg	MUST BE RECE FEBRUARY 15, ame or Address. RN OF TAX WIT DOLLARS 1.	2017 	526 N. WEBSTER STREET GIBSONBURG, OH 43431 TELEPHONE (419) 637-6004 If receipt is desired, submit additional copy a enclose self-addressed, stamped envelope D17	
ILLAGE OF GIBSONBURG EMPLOYER'S MONTHLY RETUING. Taxable Earnings paid all Employees subject to Village of Gibsonburg Income Tax	MUST BE RECE FEBRUARY 15, ame or Address. RN OF TAX WIT DOLLARS 1.	2017 	S26 N. WEBSTER STREET GIBSONBURG, OH 43431 TELEPHONE (419) 637-6004 If receipt is desired, submit additional copy a enclose self-addressed, stamped envelope. D17	
TILLAGE OF GIBSONBURG EMPLOYER'S MONTHLY RETURN. Taxable Earnings paid all Employees subject to Village of Gibsonburg Income Tax	MUST BE RECE FEBRUARY 15, ame or Address. RN OF TAX WIT DOLLARS 1. 2. 3. 4.	2017 	S26 N. WEBSTER STREET GIBSONBURG, OH 43431 TELEPHONE (419) 637-6004 If receipt is desired, submit additional copy as enclose self-addressed, stamped enveloped. D17	

Taxable Earnings paid all Employees Authors of Cibbookhura Income Toy	DOLLARS	CENTS	I hereby certify that the information and s contained herein are true and correct.	statements
subject to Village of Gibsonburg Income Tax				
Is this a courtesy withholding? ☐ YES Is this a final return? ☐ YES ☐ NO			(Signed)	
			(Official Title) Da	ate
If yes, attach explanation 2. Actual Tax Withheld in Village of Gibsonburg			Federal ID no.	
Actual lax withheld in village of Gibsonburg			Federal ID no	
4. Penalty (50% per month)			THIS RETURN MUST BE RECEIVE	
5. Interest (.42% per month)			BEFORE THE DUE DATE SHOWN	
6. Total – (Lines 2-5)			MAKE CHECK OR MONEY ORDER P. GIBSONBURG TAX DEPARTN	
NAME AND ADDRESS	FOR THE PERIC	D ENDING	MAIL TO: VILLAGE OF GIBSONBUR INCOME TAX DEPARTMEN	-5
	MUST BE RECE APRIL 15, 2017	IVED BY	526 N. WEBSTER STREET GIBSONBURG, OH 43431 TELEPHONE (419) 637-600	
Notify the Income Tax Department promptly of any change in Ownership, Nam	e or Address.		If receipt is desired, submit addition enclose self-addressed, stamped	
VILLAGE OF GIBSONBURG EMPLOYER'S MONTHLY RETURN	OF TAX WIT	 HHELD 20	D17	н РАУМFN
	DOLLARS	CENTS	I hereby certify that the information and s	
Taxable Earnings paid all Employees Subject to Village of Cibcophura Income Tax			contained herein are true and correct.	statements
subject to Village of Gibsonburg Income Tax				
Is this a final return?			(Signed)	
			(Official Title) Da	ate
If yes, attach explanation			,	
2. Actual Tax Withheld in Village of Gibsonburg			Federal ID no.	
3. Adjustment of Tax for prior month			THIS RETURN MUST BE RECEIVE	_
4. Penalty (50% per month)			BEFORE THE DUE DATE SHOWN	BELOW
5. Interest (.42% per month)			MAKE CHECK OR MONEY ORDER P. GIBSONBURG TAX DEPARTM	
6. Total – (Lines 2-5)				ILIN I
NAME AND ADDRESS	FOR THE PERIC	D ENDING	MAIL TO: VILLAGE OF GIBSONBUR	G 4
	APRIL		INCOME TAX DEPARTMEN	NI
	MUST BE RECE MAY 15, 2017	IVED BY	526 N. WEBSTER STREET GIBSONBURG, OH 43431 TELEPHONE (419) 637-600	
Notify the Income Tax Department promptly of any change in Ownership, Nam	e or Address.		If receipt is desired, submit addition enclose self-addressed, stamped	
VILLAGE OF GIBSONBURG EMPLOYER'S MONTHLY RETURN		HHELD 20		
Taxable Earnings paid all Employees	DOLLARS	CENTS	I hereby certify that the information and s	statements
subject to Village of Gibsonburg Income Tax1.			contained herein are true and correct.	
Is this a courtesy withholding? ☐ YES				
Is this a final return? ☐ YES ☐ NO			(Signed)	
If yes, attach explanation			(Official Title) Da	ate
Actual Tax Withheld in Village of Gibsonburg			Federal ID no.	
3. Adjustment of Tax for prior month				
4. Penalty (50% per month)			THIS RETURN MUST BE <u>RECEIVE</u> BEFORE THE DUE DATE SHOWN	
5. Interest (.42% per month)			MAKE CHECK OR MONEY ORDER P.	
6. Total – (Lines 2-5)			GIBSONBURG TAX DEPARTM	
NAME AND ADDRESS	FOR THE PERIC	D ENDING	MAIL TO: VILLAGE OF GIBSONBUR INCOME TAX DEPARTMEN	1.3
	MUST BE RECE JUNE 15, 2017	IVED BY	526 N. WEBSTER STREET GIBSONBURG, OH 43431 TELEPHONE (419) 637-600	

If receipt is desired, submit additional copy and enclose self-addressed, stamped envelope.

Taxable Earnings paid all Employees Subject to Village of Gibsophura Income Tax	DOLLARS	CENTS	I hereby certify that the information and statements contained herein are true and correct.
subject to Village of Gibsonburg Income Tax			
Is this a courtesy withholding? ☐ YES Is this a final return? ☐ YES ☐ NO			(Signed)
			(Official Title) Date
If yes, attach explanation 2. Actual Tax Withhold in Village of Cibeophura			Federal ID no.
2. Actual Tax Withheld in Village of Gibsonburg			Federal ID no
3. Adjustment of Tax for prior month			THIS RETURN MUST BE RECEIVED ON OR
5. Interest (.42% per month)			BEFORE THE DUE DATE SHOWN BELOW
6. Total – (Lines 2-5)			MAKE CHECK OR MONEY ORDER PAYABLE TO GIBSONBURG TAX DEPARTMENT
IAME AND ADDRESS			MAIL TO:
WINE WAS ABSTREES	FOR THE PERIO	D ENDING	VILLAGE OF GIBSONBURG
	MUST BE RECE	VED BY	INCOME TAX DEPARTMENT 526 N. WEBSTER STREET GIBSONBURG, OH 43431
	JULY 15, 2017		TELEPHONE (419) 637-6004
Notify the Income Tax Department promptly of any change in Ownership, Nan	ne or Address.		If receipt is desired, submit additional copy and enclose self-addressed, stamped envelope.
VILLAGE OF GIBSONBURG EMPLOYER'S MONTHLY RETURN			017
Taxable Earnings paid all Employees	DOLLARS	CENTS	I hereby certify that the information and statements
subject to Village of Gibsonburg Income Tax1.			contained herein are true and correct.
Is this a courtesy withholding? YES			0:
Is this a final return? ☐ YES ☐ NO			(Signed)
If yes, attach explanation			(Official Title) Date
2. Actual Tax Withheld in Village of Gibsonburg			Federal ID no.
. Adjustment of Tax for prior month			THIS RETURN MUST BE <u>RECEIVED</u> ON OR
1. Penalty (50% per month)			BEFORE THE DUE DATE SHOWN BELOW
5. Interest (.42% per month)			MAKE CHECK OR MONEY ORDER PAYABLE TO
6. Total – (Lines 2-5)			GIBSONBURG TAX DEPARTMENT
NAME AND ADDRESS	FOR THE PERIO	D ENDING	MAIL TO: VILLAGE OF GIBSONBURG
	JULY		INCOME TAX DEPARTMENT 7
	MUST BE RECE AUGUST 15, 20		526 N. WEBSTER STREET GIBSONBURG, OH 43431 TELEPHONE (419) 637-6004
			If receipt is desired, submit additional copy and
Notify the Income Tax Department promptly of any change in Ownership, Nan	e or Address.		enclose self-addressed, stamped envelope.
VILLAGE OF GIBSONBURG EMPLOYER'S MONTHLY RETURN	I OF TAX WIT	HHELD 20	017
	DOLLARS	CENTS	
Taxable Earnings paid all Employees	DOLL TITO	OLIVIO	I hereby certify that the information and statements contained herein are true and correct.
subject to Village of Gibsonburg Income Tax1.			contained herein are true and contest.
Is this a courtesy withholding? YES			(Signed)
Is this a final return? ☐ YES ☐ NO			
If yes, attach explanation			(Official Title) Date
2. Actual Tax Withheld in Village of Gibsonburg			Federal ID no
3. Adjustment of Tax for prior month			THIS RETURN MUST BE <u>RECEIVED</u> ON OR
4. Penalty (50% per month)			BEFORE THE DUE DATE SHOWN BELOW
5. Interest (.42% per month)			MAKE CHECK OR MONEY ORDER PAYABLE TO
S. Total – (Lines 2-5)			GIBSONBURG TAX DEPARTMENT
AME AND ADDRESS	FOR THE PERIO	D ENDING	MAIL TO: VILLAGE OF GIBSONBURG INCOME TAX DEPARTMENT 8
	MUST BE RECE	VED BY	526 N. WEBSTER STREET
	SEPTEMBER 15		GIBSONBURG, OH 43431 TELEPHONE (419) 637-6004

1. Taxable Earnings paid all Employees	DOLLARS	CENTS	I hereby certify that the information and statements contained herein are true and correct.
subject to Village of Gibsonburg Income Tax1.			contained nerein are true and correct.
Is this a courtesy withholding? ☐ YES			(Signed)
Is this a final return? ☐ YES ☐ NO			
If yes, attach explanation			(Official Title) Date
2. Actual Tax Withheld in Village of Gibsonburg			Federal ID no
3. Adjustment of Tax for prior month			THIS RETURN MUST BE RECEIVED ON OR
4. Penalty (50% per month)			BEFORE THE DUE DATE SHOWN BELOW
5. Interest (.42% per month)			MAKE CHECK OR MONEY ORDER PAYABLE TO
6. Total – (Lines 2-5)			GIBSONBURG TAX DEPARTMENT
NAME AND ADDRESS	FOR THE PERIO SEPTEMBER MUST BE RECE OCTOBER 15, 2	IVED BY	MAIL TO: VILLAGE OF GIBSONBURG INCOME TAX DEPARTMENT 526 N. WEBSTER STREET GIBSONBURG, OH 43431
Notify the Income Tax Department promptly of any change in Ownership, Nam		.017	TELEPHONE (419) 637-6004 If receipt is desired, submit additional copy and enclose self-addressed, stamped envelope.
VILLAGE OF GIBSONBURG EMPLOYER'S MONTHLY RETURN	I OF TAX WIT	 HHELD 20	017
	DOLLARS	CENTS	
Taxable Earnings paid all Employees Application Village of Cibarabura Income Tay			I hereby certify that the information and statements contained herein are true and correct.
subject to Village of Gibsonburg Income Tax			
Is this a courtesy withholding? YES In this a final return? YES IN NO.			(Signed)
Is this a final return? ☐ YES ☐ NO			(Official Title) Date
If yes, attach explanation			
2. Actual Tax Withheld in Village of Gibsonburg			Federal ID no.
3. Adjustment of Tax for prior month			THIS RETURN MUST BE RECEIVED ON OR
			BEFORE THE DUE DATE SHOWN BELOW
			MAKE CHECK OR MONEY ORDER PAYABLE TO GIBSONBURG TAX DEPARTMENT
			MAIL TO:
NAME AND ADDRESS	FOR THE PERIC	D ENDING	VILLAGE OF GIBSONBURG
		W (ED D) (INCOME TAX DEPARTMENT
	MUST BE RECE		526 N. WEBSTER STREET GIBSONBURG, OH 43431 TELEPHONE (419) 637-6004
Notify the Income Tax Department promptly of any change in Ownership, Nam	e or Address.		If receipt is desired, submit additional copy and enclose self-addressed, stamped envelope.
VILLAGE OF GIBSONBURG EMPLOYER'S MONTHLY RETURN		HHELD 20	
Taxable Earnings paid all Employees	DOLLARS	CENTS	I hereby certify that the information and statements
subject to Village of Gibsonburg Income Tax1.			contained herein are true and correct.
Is this a courtesy withholding? YES			
Is this a final return? YES NO			(Signed)
If yes, attach explanation			(Official Title) Date
Actual Tax Withheld in Village of Gibsonburg			Federal ID no.
3. Adjustment of Tax for prior month			
4. Penalty (50% per month)			THIS RETURN MUST BE <u>RECEIVED</u> ON OR BEFORE THE DUE DATE SHOWN BELOW
5. Interest (.42% per month)			
6. Total – (Lines 2-5)			MAKE CHECK OR MONEY ORDER PAYABLE TO GIBSONBURG TAX DEPARTMENT
NAME AND ADDRESS	FOR THE PERIC	D ENDING	MAIL TO: VILLAGE OF GIBSONBURG INCOME TAX DEPARTMENT
	MUST BE RECE		526 N. WEBSTER STREET GIBSONBURG, OH 43431 TELEPHONE (419) 637-6004

If receipt is desired, submit additional copy and enclose self-addressed, stamped envelope.

subject to Village Is this a courte Is this a final result of If yes, attach et a. Actual Tax With 3. Adjustment of	ssy withholding? \(\textstyre{\t	come Tax1.			I hereby certify that the information and statements contained herein are true and correct. (Signed)
Is this a courte Is this a final re If yes, attach e Actual Tax With Adjustment of	ssy withholding? \(\textstyre{\t	YES O			
Is this a final re If yes, attach e 2. Actual Tax With 3. Adjustment of	eturn?	0			
If yes, attach e 2. Actual Tax With 3. Adjustment of	xplanation nheld in Village of Gib				(Official Title) Date
 Actual Tax With Adjustment of 	nheld in Village of Gib	osonbura 2			
3. Adjustment of	-				Federal ID no.
-					rederal ID No.
4. 1 charty (5070 F	5	4.			THIS RETURN MUST BE <u>RECEIVED</u> ON OR
5. Interest (.42%)	ŕ	5.			BEFORE THE DUE DATE SHOWN BELOW
					MAKE CHECK OR MONEY ORDER PAYABLE TO GIBSONBURG TAX DEPARTMENT
	,	0.			MAIL TO:
NAME AND ADDRES	55		FOR THE PERIOD	ENDING	VILLAGE OF GIBSONBURG
			DECEMBER		INCOME TAX DEPARTMENT
			MUST BE RECEIVE		526 N. WEBSTER STREET GIBSONBURG, OH 43431
			JANUARY 15, 201	0	TELEPHONE (419) 637-6004
National Income 7	·	W	Add		If receipt is desired, submit additional copy and
Notify the income is	ax Department promp	tly of any change in Ownership, Nam	e or Address.		enclose self-addressed, stamped envelope.
ANNUAL RE W-2'S MUST BE A MAIL TO: INCO VILLA 526 N GIBS	ME TAX DEPARTMI AGE OF GIBSONBU N. WEBSTER ST. ONBURG, OH 4343 NE: (419) 637-6004	ENT RG	FEBRUARY MARCH 1ST QUARTER APRIL MAY	AUGUST SEPTEMBI 3RD QUART OCTOBEI NOVEMBE	1. TOTAL # GIBSONBURG W-2'S\$ 2. GIBSONBURG WAGES SUBJECT TO WITHHOLDING TAX\$ 3. AMOUNT OF GIBSONBURG TAX WITHHELD\$ 4. AMOUNT OF RESIDENCE
PAYN	MENT ENCLOSED		JUNE	DECEMBE	
DEEL	JND REQUESTED		2ND QUARTER	4TH QUART	5. TOTAL GIBSONBURG
NEFC	ND REQUESTED		בווס עסיווויבוו	1111 007111	TAX DUE\$
NAME:		FIN:	I hereby certify th	at the informa	ation and statements contained herein are true and correct. Title
			Federal ID no		Date
			Phone no		