<u>W1</u>	THH	<u>OLDII</u>	NG :	<u>l'AX</u>	REC	<u>XON</u>	CIL	AT	<u>IOI</u>	١
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ACCOMPANY THIS FORM BY FEB 28

LEGIBLE COPIES OF W-2 FORMS MUST

with Forms w-2 Submitted Herewith For Period From

PHONE: (419) 693-9326 FAX: (419) 690-1691 1. Total number of employees subject to Northwood tax and number of W-2 Forms submitted herewith: 2. Total amount of Northwood Tax Withheld from all employees: 3. Total amount of all wages paid subject

NORTHWOOD DEPT OF TAXATION

6000 WALES RD

NORTHWOOD, OH 43619

to Northwood tax:

periods of either monthly or quarterly: MONTHLY DUE DATES Feb 15 Mar 15

5. Grand Total Remitted \$

Apr 15

Jun 15

Jul 15

May 15

Aug 15 Sep 15 Oct 15 Nov 15

Dec 15 Jan 15

Items 2 and 5 should be identical, explain fully any discrepancy.

4. Total Northwood income tax withheld from compensation, for the

1st Otr.

OUARTERLY

2nd Otr.