

WITHHOLDING TAX RECONCILIATION

Village of Lewisburg
Income Tax Dept
PO Box 697
Lewisburg, Ohio 45338

1. Total Number of employees as represented by
Forms W-2 submitted herewith _____

2. Total Income Tax Withheld from compensation
Paid all employees \$ _____

**LEGIBLE COPIES OF W-2 FORMS MUST
ACCOMPANY THIS FORM BY FEB 28TH**

3. Total Income Tax Withheld from compensation
during for:

1st Quarter ending March 31st \$ _____

2nd Quarter ending June 30th \$ _____

3rd Quarter ending September 30 \$ _____

4th Quarter ending December 31 \$ _____

4. Total Amount Withheld

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