Village of Gambier

2022 EMPLOYER'S MONTHLY RETURN OF INCOME TAX WITHHELD

Income Tax Department P.O. Box 1994

Address:

Due on or Before 02/15/2022 For Period JAN Gambier, Ohio 43022 Tax Year 2022 Notify Income Tax Department promptly of any change in ownership or name and 1. Total Compensation Paid This Period address shown below. 2. Total Withheld This Period 3. Adjustments to prior returns **TAX RATE IS 1.5%** 4. Penalty and/or Interest Fed. ID # _____ 5. Total Make check or money order payable to: Village of Gambier Name: I hereby certify that the information and statements contained herein are true and correct. (signed)_____ Address: (Official Title) Date Village of Gambier 2022 EMPLOYER'S MONTHLY RETURN OF INCOME TAX WITHHELD Income Tax Department Due on or Before 03/15/2022 P.O. Box 1994 For Period FEB Gambier, Ohio 43022 Tax Year 2022 Notify Income Tax Department promptly of any change in ownership or name and Total Compensation Paid This Period 1. address shown below. 2. Total Withheld This Period Adjustments to prior returns \$_____ **TAX RATE IS 1.5%** Penalty and/or Interest 4. 5. Total Fed. ID # _____ Make check or money order payable to: Village of Gambier I hereby certify that the information and statements contained herein are true and correct. Name: _____ (signed) (Official Title) Date Address: _____ Village of Gambier 2022 EMPLOYER'S MONTHLY RETURN OF INCOME TAX WITHHELD Income Tax Department Due on or Before 04/15/2022 P.O. Box 1994 For Period MAR Gambier, Ohio 43022 Tax Year 2022 Total Compensation Paid This Period Notify Income Tax Department promptly of any change in ownership or name and 1. address shown below. Total Withheld This Period 2. 3. \$_____ Adjustments to prior returns TAX RATE IS 1.5% 4. Penalty and/or Interest Fed. ID # _____ 5. Total Make check or money order payable to: Village of Gambier Name:

Date

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

(Official Title)

(signed)____

Village of Gambier

2022 EMPLOYER'S MONTHLY RETURN OF INCOME TAX WITHHELD

Address: _____

P.O. Box 1994	Due on or	Before 05/15/2022 For Period APF
Gambier, Ohio 43022		Tax Year 2022
Notify Income Tax Department promptly of any change in ownership or name and address shown below.	6. Total Compensation Paid This Period	\$
addiess shown below.	7. Total Withheld This Period	\$
TAX RATE IS 1.5%	Adjustments to prior returns	\$
F 1 ID #	Penalty and/or Interest	\$
Fed. ID #	10. Total	\$
Name:	Make check or money order payable to: Village of Gambier	
	I hereby certify that the information and statements contained he	erein are true and correct
	(signed)	
Address:	(Official Title)	
	(**************************************	Dat
Village of Gambier Income Tax Department P.O. Box 1994 Gambier, Ohio 43022	S MONTHLY RETURN OF INCOME TA	Before 06/15/2022 For Period MA
	C. Total Companyation Daid This David	Tax Year 2022
Notify Income Tax Department promptly of any change in ownership or name and address shown below.	6. Total Compensation Paid This Period	\$
	7. Total Withheld This Period	\$
TAX RATE IS 1.5%	8. Adjustments to prior returns	\$
	Penalty and/or Interest	\$
E.J. ID.4	10. Total	\$
Fed. ID #	Make check or money order payable to: Village of Gambier	
Name:	I hereby certify that the information and statements contained he	erein are true and correct
	(signed)	
	(Official Title)	
Address:	(* * * * * * * * * * * * * * * * * * *	Dat
Village of Gambier Income Tax Department P.O. Box 1994 Gambier, Ohio 43022	S'S MONTHLY RETURN OF INCOME TA	AX WITHHELD Before 07/15/202: For Period JUNI Tax Year 2022
Notify Income Tax Department promptly of any change in ownership or name and	6. Total Compensation Paid This Period	\$
address shown below.	7. Total Withheld This Period	\$
TAX RATE IS 1.5%	8. Adjustments to prior returns	\$
LIMA AND AND IN /V	9. Penalty and/or Interest	\$
Fed. ID #	10. Total	\$
Nome	Make check or money order payable to: Village of Gambier	

Date

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

(signed)____

(Official Title) _____

Village of Gambier

2022 EMPLOYER'S MONTHLY RETURN OF INCOME TAX WITHHELD

(Official Title)

Date

Income Tax Department P.O. Box 1994 Cambier, Objo 43022

Address:

Due on or Before 08/15/2022 For Period JUL

Gambier, Ohio 43022 Tax Year 2022 Notify Income Tax Department promptly of any change in ownership or name and 11. Total Compensation Paid This Period address shown below. 12. Total Withheld This Period 13. Adjustments to prior returns **TAX RATE IS 1.5%** 14. Penalty and/or Interest Fed. ID # _____ 15. Total Make check or money order payable to: Village of Gambier Name: I hereby certify that the information and statements contained herein are true and correct. (signed)_____ Address: (Official Title) Date Village of Gambier 2022 EMPLOYER'S MONTHLY RETURN OF INCOME TAX WITHHELD Income Tax Department Due on or Before 09/15/2022 P.O. Box 1994 For Period AUG Gambier, Ohio 43022 Tax Year 2022 Notify Income Tax Department promptly of any change in ownership or name and 11. Total Compensation Paid This Period address shown below. 12. Total Withheld This Period 13. Adjustments to prior returns \$_____ **TAX RATE IS 1.5%** 14. Penalty and/or Interest 15. Total Fed. ID # _____ Make check or money order payable to: Village of Gambier I hereby certify that the information and statements contained herein are true and correct. Name: _____ (signed) (Official Title) Date Address: _____ 2022 EMPLOYER'S MONTHLY RETURN OF INCOME TAX WITHHELD Village of Gambier Income Tax Department Due on or Before 10/15/2022 P.O. Box 1994 For Period SEPT Gambier, Ohio 43022 Tax Year 2022 11. Total Compensation Paid This Period Notify Income Tax Department promptly of any change in ownership or name and address shown below. 12. Total Withheld This Period \$_____ 13. Adjustments to prior returns TAX RATE IS 1.5% 14. Penalty and/or Interest Fed. ID # _____ 15. Total Make check or money order payable to: Village of Gambier Name: I hereby certify that the information and statements contained herein are true and correct. (signed)____

2022 EMPLOYER'S MONTHLY RETURN OF INCOME TAX WITHHELD

(Official Title)

Date

Village of Gambier Income Tax Department

Address:

Due on or Before 11/15/2022

P.O. Box 1994 Gambier, Ohio 43022		540 011 01	For Period OCT Tax Year 2022
Notify Income Tax Department promptly of any change in ownership or name and	16.	Total Compensation Paid This Period	\$
address shown below.	17.		\$
TAX RATE IS 1.5%	18.	Adjustments to prior returns	\$
17A RATE 13 1.3 /0	19.	Penalty and/or Interest	\$
Fed. ID #	20.	Total	\$
Name:	Ма	ake check or money order payable to: Village of Gambier	
	I hereby ce	ertify that the information and statements contained he	erein are true and correct.
	(signed)		
Address:	(Officia	l Title)	
			Date
Village of Gambier Income Tax Department P.O. Box 1994 Gambier, Ohio 43022	R'S MON	THLY RETURN OF INCOME TA	AX WITHHELD Before 12/15/2022 For Period NOV Tax Year 2022
Notify Income Tax Department promptly of any change in ownership or name and	16.	Total Compensation Paid This Period	\$
address shown below.		Total Withheld This Period	\$
THAN DATE IC 1 50/		Adjustments to prior returns	\$
TAX RATE IS 1.5%		Penalty and/or Interest	\$
		Total	\$
Fed. ID #	Ма	ake check or money order payable to: Village of Gambier	-
Name:	I hereby ce	ertify that the information and statements contained he	erein are true and correct.
	(signed)		
	(Officia	l Title)	
Address:	·	,	Date
Village of Gambier Income Tax Department P.O. Box 1994 Gambier, Ohio 43022	R'S MON	THLY RETURN OF INCOME TA	AX WITHHELD Before 01/15/2023 For Period DEC Tax Year 2022
Notify Income Tax Department promptly of any change in ownership or name and	16.	Total Compensation Paid This Period	\$
address shown below.	17.	Total Withheld This Period	\$
TAX RATE IS 1.5%	18.	Adjustments to prior returns	\$
	19.	Penalty and/or Interest	\$
Fed. ID #	20.	Total	\$
Name:	Ма	ake check or money order payable to: Village of Gambier	
		ertify that the information and statements contained he	erein are true and correct.
	(signed)		

2022 WITHHOLDING TAX RECONCILIATION

Village of Gambier Income Tax Dept P.O. Box 1994 Gambier OH 43022

LEGIBLE COPIES OF W-2 FORMS MUST ACCOMPANY THIS FORM BY FEBRUARY 28th 2023

3. Total Income Tax Withheld from compensation during 2022 for:

Jan.	\$	Jul.	\$		
Feb.	\$	Aug.	\$		
Mar.	\$	Sep.	\$		
Apr.	\$	Oct.	\$		
May.	\$	Nov.	\$		
Jun.	\$	Dec.	\$		
4. Total An	nount Withhe	eld			
Parts 2 and 4 should be identical, explain fully any discrepancy.					