

**WITHHOLDING TAX RECONCILIATION**

Village of Deshler (419) 278-2955  
Income Tax Department  
101 E. Main St.  
Deshler, Ohio 43516

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

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

**Name & Address:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**EIN:** \_\_\_\_\_

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

3. Total Income Tax Withheld from compensation  
during 20\_\_\_\_ for:

1<sup>st</sup> Quarter ending March 31<sup>st</sup> \$ \_\_\_\_\_  
2<sup>nd</sup> Quarter ending June 30<sup>th</sup> \$ \_\_\_\_\_  
3<sup>rd</sup> Quarter ending September 30<sup>th</sup> \$ \_\_\_\_\_  
4<sup>th</sup> Quarter ending December 31<sup>st</sup> \$ \_\_\_\_\_

4. Total Amount Withheld \_\_\_\_\_

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

**Preparer's Signature** \_\_\_\_\_

**Date** \_\_\_\_\_ **Phone** \_\_\_\_\_