

**RECONCILIATION OF VAN WERT INCOME  
TAX WITHHELD FROM WAGES**

W-3 - VAN WERT

<p>1. Total number of employees as represented by Forms W-2 submitted herewith ..... _____</p> <p>2. Total City Income Tax withheld from wages during _____ as shown by employee's statement (Form W-2) ..... \$ _____</p> <p>3. Gross Local Wages \$ _____ at 1.72 % \$ _____</p>	<p>4. Total City Income Tax Withheld during</p> <table border="0" style="width: 100%;"> <tr> <td style="padding-right: 20px;">Quarter ended March 31,</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td>Quarter ended June 30,</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td>Quarter ended September 30,</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td>Quarter ended December 31,</td> <td style="text-align: right;">\$ _____</td> </tr> </table> <p>5. TOTAL ..... \$ _____</p> <p>6. Difference between Lines 3 &amp; 5 ..... \$ _____</p> <div style="border: 1px solid black; height: 30px; width: 100%; margin-top: 10px;"></div> <p style="font-size: small; margin-top: 10px;">* If Line 6 indicates a balance due, the amount thereof should accompany this return; If Line 6 indicates an overpayment, a refund request signed by the employer should be made.</p>	Quarter ended March 31,	\$ _____	Quarter ended June 30,	\$ _____	Quarter ended September 30,	\$ _____	Quarter ended December 31,	\$ _____
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REORDER FROM: C.J. BUSINESS FORMS (440) 967-1500 OR 1-(888) 967-1500

**INSTRUCTIONS**

The original of this reconciliation form must be filed with the TAX ADMINISTRATOR, City of Van Wert • 515 E. Main St. • Van Wert, Ohio 45891, on or before February 28, unless written request for extension has been made to and granted (in writing) by the Administrator. This form must be accompanied by copies of employee's statements (Form W-2) or a printout (triple spaced) showing (1) name and address of employee; (2) Social Security number; (3) gross earnings paid before any payroll deductions; (4) Amount of Van Wert and other city income tax withheld; and (5) name and address of employer.

Including any applicable 1099-Misc

**Forms.**

If the difference between lines 2 and 4 indicates a balance due, the amount thereof should accompany this return; if the difference indicates an overpayment, attach an explanation.

**CITY OF VAN WERT  
INCOME TAX ADMINISTRATOR  
515 E. MAIN STREET  
VAN WERT, OHIO 45891**