RECONCILIATION OF NEW LEBANON, OHIO INCOME TAX WITHHELD FROM WAGES

Form EQR

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

2. Total New Lebanon Income Tax withheld from wages during _____ as shown by employee's W-2 Form . . . . . _____

3. Total New Lebanon Income Tax Withheld during _____ for:

   Quarter ending March 31, _____ $ _____

   Quarter ending June 30, _____ $ _____

   Quarter ending Sept. 30, _____ $ _____

   Quarter ending Dec. 31, _____ $ _____

4. **TOTAL**. . . . . $ _____

5. Difference between Lines 2 & 4 $ _____

FED ID NUMBER

NAME OF COMPANY FILING

ADDRESS

PHONE NUMBER

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

(Signed)

Official Title) Date

If Line 2 is less than Line 4, the amount in Line 5 represents a PAYMENT DUE. Payment shall accompany this form. If Line 2 is greater than Line 4, the amount in Line 5 represents a REFUND DUE. A refund request, signed by the employee, should be made.

W-3

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