

**WITHHOLDING TAX RECONCILIATION FOR EMPLOYER'S QUARTERLY RETURNS**

SEE INSTRUCTIONS BEFORE COMPLETING THIS FORM

**TAX YEAR 2017**

MAKE CHECK OR MONEY ORDER TO:  
**CITY OF BRUNSWICK TAX DEPARTMENT**  
 P.O. BOX 0816  
 BRUNSWICK, OH 44212-0816

1. TOTAL NUMBER OF EMPLOYEES REPRESENTED BY STATEMENTS  
 HEREWITH .....
2. TOTAL PAYROLL FOR THE YEAR \$.....
3. LESS PAYROLL NOT SUBJECT TO TAX \$.....

4. PAYROLL SUBJECT TO TAX (Line 2 minus Line 3) \$.....
5. WITHHOLDING TAX LIABILITY \$.....
6. TOTAL BRUNSWICK INCOME TAX PERMITTED
- |          |         |           |         |
|----------|---------|-----------|---------|
| January  | \$..... | July      | \$..... |
| February | \$..... | August    | \$..... |
| March    | \$..... | September | \$..... |
| April    | \$..... | October   | \$..... |
| May      | \$..... | November  | \$..... |
| June     | \$..... | December  | \$..... |
- TOTAL REMITTED \$.....
7. DIFFERENCE BETWEEN LINES (5 & 6).....  
 \$ .....OR TAX DUE \$ .....

FEDERAL I.D. NO.

**Reconciliation is due by the  
 last day of February**

**RETURN THIS COPY WITH PAYMENT**