

Form BW-1 EMPLOYER'S WITHHOLDING – MONTHLY/QUARTERLY



- 1. Number of Taxable Employees
- 2. Total Salaries, Wages, Commissions and other Compensation paid all employees
- 3. Taxable earnings (from line 2)
- 4. Actual Tax withheld at 1.800%
- 5. Adjustments of Tax for Prior Period
- Total (include interest and Penalty if Due)

1		
2		
3		
4		
5		
6		

TAX YEAR _____

I hereby certify that the information and statements contained herein and in any schedules or exhibits attached are true and correct.

Signed _____
 Title _____ Date _____
 Phone# _____

Name
 And
 Address

<u>MAKE CHECK OR MONEY ORDER TO:</u>	
BRYAN CITY INCOME TAX	
PO BOX 190	
BRYAN OH 43506	
Voice 419-636-0772	Fax 419-636-6522

Interest – 10% annum or 0.83% monthly
 Penalty – 1% of the unpaid tax for each month or each part of a month, or \$15.00, whichever is greater.

Period Ending _____
 TAX ID _____