

MD1

EMPLOYER MONTHLY RETURN OF WITHHOLDING TAX

Name and Address - Please make necessary corrections

Sylvania Income Tax Division  
PO Box 510  
Sylvania, OH 43560

2020

Prepared via Tax Tool

Account #

Federal ID #

Month ending: January 31, 2020

Due date: February 17, 2020

☐ Check if final return. Reason: \_\_\_\_\_

Payment amount: \$ \_\_\_\_\_

Signature \_\_\_\_\_ Title \_\_\_\_\_ Phone \_\_\_\_\_

MO2

EMPLOYER MONTHLY RETURN OF WITHHOLDING TAX

Name and Address - Please make necessary corrections

Sylvania Income Tax Division  
PO Box 510  
Sylvania, OH 43560

2020

Prepared via Tax Tool

Account #

Federal ID #

Month ending: February 29, 2020

Due date: March 16, 2020

☐ Check if final return. Reason: \_\_\_\_\_

Payment amount: \$ \_\_\_\_\_

Signature \_\_\_\_\_ Title \_\_\_\_\_ Phone \_\_\_\_\_

MO3

EMPLOYER MONTHLY RETURN OF WITHHOLDING TAX

Name and Address - Please make necessary corrections

Sylvania Income Tax Division  
PO Box 510  
Sylvania, OH 43560

2020

Prepared via Tax Tool

Account #

Federal ID #

Month ending: March 31, 2020

Due date: April 15, 2020

☐ Check if final return. Reason: \_\_\_\_\_

Payment amount: \$ \_\_\_\_\_

Signature \_\_\_\_\_ Title \_\_\_\_\_ Phone \_\_\_\_\_

MD4

EMPLOYER MONTHLY RETURN OF WITHHOLDING TAX

Name and Address - Please make necessary corrections

Sylvania Income Tax Division  
PO Box 510  
Sylvania, OH 43560

2020

Prepared via Tax Tool

Account #

Federal ID #

Month ending: April 30, 2020

Due date: May 15, 2020

☐ Check if final return. Reason: \_\_\_\_\_

Payment amount: \$ \_\_\_\_\_

Signature \_\_\_\_\_ Title \_\_\_\_\_ Phone \_\_\_\_\_

MO5

EMPLOYER MONTHLY RETURN OF WITHHOLDING TAX

Name and Address - Please make necessary corrections

Sylvania Income Tax Division  
PO Box 510  
Sylvania, OH 43560

2020

Prepared via Tax Tool

Account #

Federal ID #

Month ending: May 31, 2020

Due date: June 15, 2020

☐ Check if final return. Reason: \_\_\_\_\_

Payment amount: \$ \_\_\_\_\_

Signature \_\_\_\_\_ Title \_\_\_\_\_ Phone \_\_\_\_\_

MO6

EMPLOYER MONTHLY RETURN OF WITHHOLDING TAX

Name and Address - Please make necessary corrections

Sylvania Income Tax Division  
PO Box 510  
Sylvania, OH 43560

2020

Prepared via Tax Tool

Account #

Federal ID #

Month ending: June 30, 2020

Due date: July 15, 2020

☐ Check if final return. Reason: \_\_\_\_\_

Payment amount: \$ \_\_\_\_\_

Signature \_\_\_\_\_ Title \_\_\_\_\_ Phone \_\_\_\_\_

MD7

EMPLOYER MONTHLY RETURN OF WITHHOLDING TAX

Name and Address - Please make necessary corrections

Sylvania Income Tax Division  
PO Box 510  
Sylvania, OH 43560

2020

Prepared via Tax Tool

Account #

Federal ID #

Month ending: July 31, 2020

Due date: August 17, 2020

☐ Check if final return. Reason: \_\_\_\_\_

Payment amount: \$ \_\_\_\_\_

Signature \_\_\_\_\_ Title \_\_\_\_\_ Phone \_\_\_\_\_

MO8

EMPLOYER MONTHLY RETURN OF WITHHOLDING TAX

Name and Address - Please make necessary corrections

Sylvania Income Tax Division  
PO Box 510  
Sylvania, OH 43560

2020

Prepared via Tax Tool

Account #

Federal ID #

Month ending: August 31, 2020

Due date: September 15, 2020

☐ Check if final return. Reason: \_\_\_\_\_

Payment amount: \$ \_\_\_\_\_

Signature \_\_\_\_\_ Title \_\_\_\_\_ Phone \_\_\_\_\_



MO9

EMPLOYER MONTHLY RETURN OF WITHHOLDING TAX

Name and Address - Please make necessary corrections

Sylvania Income Tax Division  
PO Box 510  
Sylvania, OH 43560

2020

Prepared via Tax Tool

Account #

Federal ID #

Month ending: September 30, 2020

Due date: October 15, 2020

☐ Check if final return. Reason: \_\_\_\_\_

Payment amount: \$ \_\_\_\_\_

Signature \_\_\_\_\_ Title \_\_\_\_\_ Phone \_\_\_\_\_

M10

EMPLOYER MONTHLY RETURN OF WITHHOLDING TAX

Name and Address - Please make necessary corrections

Sylvania Income Tax Division  
PO Box 510  
Sylvania, OH 43560

2020

Prepared via Tax Tool

Account #

Federal ID #

Month ending: October 31, 2020

Due date: November 16, 2020

☐ Check if final return. Reason: \_\_\_\_\_

Payment amount: \$ \_\_\_\_\_

Signature \_\_\_\_\_ Title \_\_\_\_\_ Phone \_\_\_\_\_

M11

EMPLOYER MONTHLY RETURN OF WITHHOLDING TAX

Name and Address - Please make necessary corrections

Sylvania Income Tax Division  
PO Box 510  
Sylvania, OH 43560

2020

Prepared via Tax Tool

Account #

Federal ID #

Month ending: November 30, 2020

Due date: December 15, 2020

☐ Check if final return. Reason: \_\_\_\_\_

Payment amount: \$ \_\_\_\_\_

Signature \_\_\_\_\_ Title \_\_\_\_\_ Phone \_\_\_\_\_

M12

EMPLOYER MONTHLY RETURN OF WITHHOLDING TAX

Name and Address - Please make necessary corrections

Sylvania Income Tax Division  
PO Box 510  
Sylvania, OH 43560

2020

Prepared via Tax Tool

Account #

Federal ID #

Month ending: December 31, 2020

Due date: January 15, 2021

☐ Check if final return. Reason: \_\_\_\_\_

Payment amount: \$ \_\_\_\_\_

Signature \_\_\_\_\_ Title \_\_\_\_\_ Phone \_\_\_\_\_

Sylvania Income Tax Division  
6730 Monroe St.  
Sylvania, OH 43560

SYLVANIA withholding payments remitted for  
following pay periods:

1. Number of W-2's ..... \_\_\_\_\_

2. SYLVANIA qualifying wages..... \_\_\_\_\_

3. SYLVANIA Income Tax withheld  
as shown on attached W-2's ..... \_\_\_\_\_

Account # \_\_\_\_\_

Federal ID # \_\_\_\_\_

☐ Check to inactivate account. Reason: \_\_\_\_\_

**DUE DATE: MARCH 1, 2021**

Prepared via Tax Tool

January..... \_\_\_\_\_

February ..... \_\_\_\_\_

March ..... \_\_\_\_\_

April ..... \_\_\_\_\_

May ..... \_\_\_\_\_

June ..... \_\_\_\_\_

July ..... \_\_\_\_\_

August ..... \_\_\_\_\_

September ..... \_\_\_\_\_

October ..... \_\_\_\_\_

November..... \_\_\_\_\_

December..... \_\_\_\_\_

4. Total Remitted ..... \_\_\_\_\_

5. Balance of Tax Due (Line 3 minus Line 4) ..... \_\_\_\_\_

6. Overpayment ..... \_\_\_\_\_

☐ A refund is requested

☐ Apply the overpayment to next year

Signed ..... \_\_\_\_\_

Title ..... \_\_\_\_\_

Phone # ..... \_\_\_\_\_