

# Sylvania Township/City of Sylvania JEDD I

2023 Employer Reconciliation of Withholding Tax

Due February 29, 2024

1. Number of W-2's	_____	Sylvania Township/City of Sylvania JEDD I Payments remitted:	
2. Sylvania Township/City of Sylvania JEDD I Qualifying wages	_____	Month ended January 31	\$ _____
		Month Ended February 28	\$ _____
		Month Ended March 31	\$ _____
3. Sylvania Township/City of Sylvania JEDD I Income tax withheld as shown on attached W-2's	_____	Month Ended April 30	\$ _____
		Month Ended May 31	\$ _____
		Month Ended June 30	\$ _____
		Month Ended July 31	\$ _____
		Month Ended August 31	\$ _____
		Month Ended September 30	\$ _____
		Month Ended October 31	\$ _____
		Month Ended November 30	\$ _____
		Month Ended December 31	\$ _____
		4. Total Remitted	\$ _____
		5. Balance due (line 3 minus line 4)	\$ _____
		6. Overpayment	\$ _____

Account # \_\_\_\_\_  
Federal Id \_\_\_\_\_  
Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_

\_\_\_\_\_  
Taxpayer signature Date

\_\_\_\_\_ A refund is requested  
\_\_\_\_\_ Apply the overpayment to next year  
Overpayments \$10.00 or less will not be  
refunded or credited.

Mail to:  
Sylvania Township/City of Sylvania JEDD I  
6730 Monroe St Ste 202  
Sylvania, OH 43560