

**ANNUAL RECONCILIATION FOR THE YEAR 2012
CITY OF MANSFIELD INCOME TAX DIVISION**

**P.O. BOX 577
MANSFIELD, OHIO 44901
PHONE (419) 755-9711
FAX (419) 755-9751**

FOR TAX OFFICE USE ONLY

W-2S _____

RECON _____

THIS RECONCILIATION MUST BE RETURNED BY FEBRUARY 28, 2013 WITH W-2S OR A LISTING OF W-2S

OR

IF YOU HAVE 100 OR MORE W-2S YOU MUST USE MAGNETIC MEDIA FOR REPORTING INFORMATION. YOUR TAPE AND THIS FORM ARE DUE BY FEBRUARY 28, 2013.

QUARTER AMOUNTS PAID:		NUMBER OF W-2S ATTACHED
1 ST QUARTER		Total Compensation reported on W-2s
2 ND QUARTER		
3 RD QUARTER		Total tax withheld as shown on W-2 forms
4 TH QUARTER		
		Total tax amount paid this year

MONTHLY AMOUNTS PAID:

1 ST MONTH		
2 ND MONTH		OVERPAYMENT: (Please send us a check or an approved credit to be applied to a future payment for the above amount)
3 RD MONTH		
4 TH MONTH		
5 TH MONTH		
6 TH MONTH		UNDERPAYMENT: (See attached check)
7 TH MONTH		
8 TH MONTH		
9 TH MONTH		
10 TH MONTH		
11 TH MONTH		
12 TH MONTH		* ENCLOSE 1099S IF WORK WAS PERFORMED WITHIN THE CITY

I CERTIFY THIS RECONCILIATION TO BE TRUE AND CORRECT.

AUTHORIZED SIGNATURE _____

TITLE _____ **PHONE NO.** _____

PRINT OR TYPE NAME OF PERSON SIGNING: _____