

**EMPLOYER'S RETURN OF TAX WITHHELD**

I hereby certify that the information and statements  
contained herein are true and correct.

Signed: \_\_\_\_\_

Official Title: \_\_\_\_\_

Date: \_\_\_\_\_

**MAKE CHECK OR MONEY ORDER PAYABLE TO:  
BRIMFIELD-KENT JEDD**

Due Dates:

**QUARTERLY:**

JAN-FEB-MAR      APRIL 30  
APR-MAY-JUN      JULY 31  
JULY-AUG-SEP      OCT. 31  
OCT-NOV-DEC      JAN. 31

**MONTHLY:**

**DUE BY THE 15TH OF THE FOLLOWING MONTH.**

Number of Taxable Employees \_\_\_\_\_

Total Employee Wages Subject  
to JEDD Income Tax      \$

Actual Tax Withheld      \$ \_\_\_\_\_

Adjustments (Attach explanation)      \$ \_\_\_\_\_

Penalty (See Below)      \$ \_\_\_\_\_

Interest (See Below)      \$ \_\_\_\_\_

Total (Due And Payable With Return)      \$ \_\_\_\_\_

**INTEREST OF 1% AND PENALTY OF 10%  
PER MONTH OR PART THEREOF MUST  
BE ASSESSED IF RETURN IS PAST DUE.**

**IF NO WAGES PAID THIS PERIOD, PLEASE MARK  
"NONE" AND RETURN WITH EXPLANATION.**

**MAIL TO: Brimfield-Kent JEDD  
325 South Depeyster St.  
Kent, OH 44240**

Please see instruction sheet for further information.

Business Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Period: \_\_\_\_\_

Account Number:

**PLEASE PHOTOCOPY FORM FOR SUBSEQUENT MONTHS/QUARTERS AS NEEDED**

**End of the Year Reconciliation**      Due By January 31

Number W2's      \_\_\_\_\_      1st Quarter      \_\_\_\_\_

2nd Quarter      \_\_\_\_\_

Total W2 Wages      \_\_\_\_\_      3rd Quarter      \_\_\_\_\_

4th Quarter      \_\_\_\_\_

1.00% of Total Wages      \_\_\_\_\_ \*      Total Sent In      \_\_\_\_\_ \*

\* Should Balance