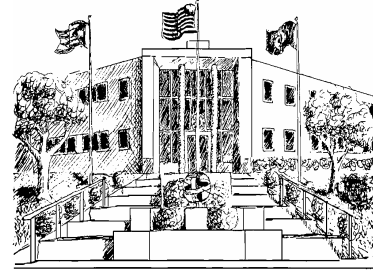


# CITY OF PARMA – DIVISION OF TAXATION

6611 RIDGE ROAD  
PARMA, OH 44129

MON-FRI  
8:30 AM TO 4:30 PM

PHONE: (440) 885-8045 – FAX: (440) 885-8044



**Michael P. Mason**  
Tax Commissioner

## Reconciliation of Parma Income Tax WITHHELD From Wages Tax Year 2006

**EMPLOYER' S FEDERAL ID#** \_\_\_\_\_

**PARMA ACCOUNT#** \_\_\_\_\_

DO NOT FAIL TO FURNISH EMPLOYEE'S ADDRESS ON W2

1. Total number of employees as represented by Forms W-2 Submitted herewith..... \_\_\_\_\_
2. Total PARMA Income Tax withheld from wages during year shown by employee's statement (Form W-2).....\$ \_\_\_\_\_

Please check type of withholding:

- Parma employment tax only  
 Parma employment and residence tax  
 Parma residence tax only

**If any of the above information is incorrect or has changed, please correct below. I.E. (name change, fid# change, business closed, etc)**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3. Total Parma Income Tax Withheld During Year (FORM PW-1) for:

Quarter ended March 31	\$ _____
Quarter ended June 30	\$ _____
Quarter ended September 30	\$ _____
Quarter ended December 31	\$ _____

4. TOTAL ..... \$ \_\_\_\_\_

\*5. Difference between Lines 2 & 4 (Instructions on Below) \$ \_\_\_\_\_

\*If Line 5 indicates a balance due, the amount thereof should accompany this return; If line 5 indicates an over-payment, it will be applied on the 2007 withholding tax unless the refund box below is checked and a signature provided.

REFUND

\_\_\_\_\_  
Authorized Signature

### INSTRUCTIONS

The original of this reconciliation form must be filed with the COMMISSIONER OF TAXATION, CITY OF PARMA, 6611 RIDGE RD.,PARMA OH 44129, on or before January 31, 2007 unless written request for extension has been made to and granted (in writing) by the Commissioner. This form must be accompanied by copies of employee's statements (Form W2) or optional form showing: (1) name, address, and city of residence of employee: (2) social security number: (3) gross earnings paid before any payroll deductions: (4) amount of PARMA and other city income tax withheld: and (5) name, address and federal identification number (FID) of employer. An adding machine tape, listing the amount of Parma income tax withheld as indicated by the individual employee's statements, should be attached thereto.

**RETURN THIS COPY WITH FORMS W2 AND ANY REQUIRED PAYMENT TO:**

**CITY OF PARMA – DIVISION OF TAXATION**  
**6611 RIDGE ROAD**  
**PARMA. OH 44129**

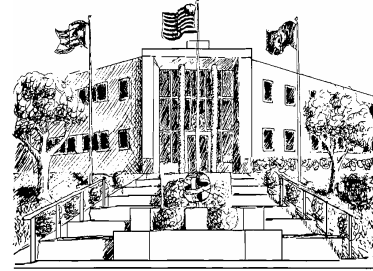
## TAX DEPARTMENT COPY – TO BE FILED

# CITY OF PARMA – DIVISION OF TAXATION

6611 RIDGE ROAD  
PARMA, OH 44129

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8:30 AM TO 4:30 PM

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**Michael P. Mason**  
Tax Commissioner

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- Quarter ended June 30                    \$ \_\_\_\_\_
- Quarter ended September 30            \$ \_\_\_\_\_
- Quarter ended December 31             \$ \_\_\_\_\_

4. TOTAL ..... \$ \_\_\_\_\_

\*5. Difference between Lines 2 & 4 (Instructions on Below)           \$ \_\_\_\_\_

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**Authorized Signature**

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**TAX PAYER COPY – RETAIN FOR YOUR RECORDS**