

VILLAGE OF BRADNER EMPLOYER'S MONTHLY RETURN OF TAX WITHHELD

☐ AMENDED

RETURN WITH PAYMENT

1. Taxable Earnings paid all Employees

subject to Village of Bradner Income Tax.....1.

Is this a courtesy withholding? ☐ YESIs this a final return? ☐ YES ☐ NO

If yes, attach explanation

2. Actual Tax Withheld in Village of Bradner.....2.

3. Adjustment of Tax for prior month3.

4. Penalty (\$25.00 per month).....4.

5. Interest (6% per month).....5.

6. Total - (Lines 2-5).....6.

NAME AND ADDRESS

FOR THE PERIOD ENDING
OCTOBER 31, 2026MUST BE RECEIVED BY
NOVEMBER 15, 2026

DOLLARS CENTS

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

(Signed) _____

(Official Title) _____ Date _____

Federal ID No. _____

THIS RETURN MUST BE RECEIVED ON OR
BEFORE THE DATE SHOWN BELOWMAKE CHECK OR MONEY ORDER PAYABLE TO
BRADNER TAX DEPARTMENTMAIL TO:
VILLAGE OF BRADNER
INCOME TAX DEPARTMENT
130 N. MAIN ST., P.O. BOX 599
BRADNER, OHIO 43406
TELEPHONE 419-288-2890

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Notify the Income Tax Department promptly of any change in Ownership, Name or Address

If receipt is desired, submit additional copy and
enclosed self-addressed, stamped envelope.

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NAME AND ADDRESS

FOR THE PERIOD ENDING
NOVEMBER 30, 2026MUST BE RECEIVED BY
DECEMBER 15, 2026

DOLLARS CENTS

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

(Signed) _____

(Official Title) _____ Date _____

Federal ID No. _____

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INCOME TAX DEPARTMENT
130 N. MAIN ST., P.O. BOX 599
BRADNER, OHIO 43406
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NAME AND ADDRESS

FOR THE PERIOD ENDING
DECEMBER 31, 2026MUST BE RECEIVED BY
JANUARY 15, 2027

DOLLARS CENTS

I hereby certify that the information and statements
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(Signed) _____

(Official Title) _____ Date _____

Federal ID No. _____

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INCOME TAX DEPARTMENT
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BRADNER, OHIO 43406
TELEPHONE 419-288-2890

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