<table>
<thead>
<tr>
<th>Month</th>
<th>Tax Year</th>
<th>Payroll Period</th>
<th>Due Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 M</td>
<td>2015</td>
<td>JANUARY 1M</td>
<td>February 28, 2015</td>
</tr>
<tr>
<td>2 M</td>
<td>2015</td>
<td>FEBRUARY 2M</td>
<td>March 31, 2015</td>
</tr>
<tr>
<td>3 M</td>
<td>2015</td>
<td>MARCH 3M</td>
<td>April 30, 2015</td>
</tr>
</tbody>
</table>

Mail to:
City of Pontiac Withholding Payments
P.O. Box 530
Eaton Rapids, MI 48827-0530
<table>
<thead>
<tr>
<th>Payroll Period</th>
<th>Due Date</th>
<th>Federal Employer ID #</th>
<th>Tax Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>4M</td>
<td>April 31, 2015</td>
<td>2015</td>
<td></td>
</tr>
<tr>
<td>5M</td>
<td>May 31, 2015</td>
<td>2015</td>
<td></td>
</tr>
<tr>
<td>6M</td>
<td>June 30, 2015</td>
<td>2015</td>
<td></td>
</tr>
</tbody>
</table>
P - 941 City of Pontiac - Income Tax Division
Employer's Return of Income Tax Withheld

If this is your first return, enter date this business was started __________________________

If this is final return, or employer status has changed, see back of form for required information to be submitted.
I certify the tax withheld as shown on this return is correct.

Signature __________________________ Date __________________________

Phone # __________________________

Mail to:
City of Pontiac Withholding Payments
P.O. Box 530
Eaton Rapids, MI 48827-0530

Make remittance payable to:
Treasurer, City of Pontiac

P. O. Box 530
Eaton Rapids, MI 48827-0530

7 M 2015

Tax withheld

Adjustments

Net tax withheld

Late payment penalty - 1% per month ($2.00 minimum)

Interest due
(contact city for daily rates)

TOTAL DUE

PAY THIS AMOUNT

FEDERAL EMPLOYER I D # __________________________

TAX YEAR 2015

PAYROLL PERIOD JULY 7M

DUE DATE August 31, 2015

DO NOT WRITE BELOW THIS LINE

Mail to:
City of Pontiac Withholding Payments
P.O. Box 530
Eaton Rapids, MI 48827-0530

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Eaton Rapids, MI 48827-0530

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Treasurer, City of Pontiac

P. O. Box 530
Eaton Rapids, MI 48827-0530

8 M 2015

Tax withheld

Adjustments

Net tax withheld

Late payment penalty - 1% per month ($2.00 minimum)

Interest due
(contact city for daily rates)

TOTAL DUE

PAY THIS AMOUNT

FEDERAL EMPLOYER I D # __________________________

TAX YEAR 2015

PAYROLL PERIOD AUGUST 8M

DUE DATE September 30, 2015

DO NOT WRITE BELOW THIS LINE

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City of Pontiac Withholding Payments
P.O. Box 530
Eaton Rapids, MI 48827-0530

P - 941 City of Pontiac - Income Tax Division
Employer's Return of Income Tax Withheld

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Signature __________________________ Date __________________________

Phone # __________________________

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Eaton Rapids, MI 48827-0530

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Treasurer, City of Pontiac

P. O. Box 530
Eaton Rapids, MI 48827-0530

9 M 2015

Tax withheld

Adjustments

Net tax withheld

Late payment penalty - 1% per month ($2.00 minimum)

Interest due
(contact city for daily rates)

TOTAL DUE

PAY THIS AMOUNT

FEDERAL EMPLOYER I D # __________________________

TAX YEAR 2015

PAYROLL PERIOD SEPTEMBER 9M

DUE DATE October 31, 2015

DO NOT WRITE BELOW THIS LINE
1. Last pay period on which Pontiac Taxes were withheld __________________________

2. Check reason for "Final Return" and answer applicable questions
   □ Business permanently discontinued
   □ Business temporarily discontinued
      Operations will be resumed on
      (Date) __________________________
   □ Still operating – Ceased paying wages
      Wages will be paid starting
      (Date) __________________________
   □ Business sold to
      Name _________________________
      Street _________________________
      City ___________________________
      State __________________________
      Zip Code _______________________  
   □ Moved out of Pontiac

3. Your current address
   Street _________________________
   City ___________________________
   State __________________________
   Zip Code _______________________  

4. □ Other: _________________________
   __________________________________
   __________________________________

1. Last pay period on which Pontiac Taxes were withheld __________________________

2. Check reason for "Final Return" and answer applicable questions
   □ Business permanently discontinued
   □ Business temporarily discontinued
      Operations will be resumed on
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      City ___________________________
      State __________________________
      Zip Code _______________________  
   □ Moved out of Pontiac

3. Your current address
   Street _________________________
   City ___________________________
   State __________________________
   Zip Code _______________________  

4. □ Other: _________________________
   __________________________________
   __________________________________