

**Form
307**

**North Dakota Office of State Tax Commissioner
North Dakota Transmittal of Wage and Tax Statement**



10152301

Account Number: 9999999999 Calendar Year: YYYY

- 1. Total ND Tax withheld per W-2s and/or 1099's 999999999999
- 2. Total ND Wages paid 999999999999
- 3. Number of W-2's attached 999999999999
- 4. Number of 1099's attached 999999999999
(only attach 1099's with ND state tax withheld)

Check this box if you no longer have ND employees AND you wish to close the account. If closing, you MUST indicate the date of last payroll below.

MM/DD/YYYY

Taxpayer NameXXXXXXXXXXXXXXXXXX
Address1XXXXXXXXXXXXXXXXXXXXXXXXX
Address2XXXXXXXXXXXXXXXXXXXXXXXXX
City State ZipXXXXXXXXXXXXXXXXXX

Tax Department use only

Amount reconciled: _____

NSW

10/2015

Do not submit payments with Form 307.

NACTP

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307**

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North Dakota Transmittal of Wage and Tax Statement

Account Number: _____ Calendar Year: _____

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- 1. Total ND Tax withheld per W-2s and/or 1099's _____
- 2. Total ND Wages paid _____
- 3. Number of W-2's attached _____
- 4. Number of 1099's attached _____
(only attach 1099's with ND state tax withheld)

Tax Department use only

Amount reconciled: _____

_____ NSW

10/2015

Do not submit payments with Form 307.