REGIONAL INCOME TAX AGENCY

P.O. BOX 94801 Cleveland, Ohio 44101-4801

CLEVELAND	800-860-7482
COLUMBUS	866-721-7482
YOUNGSTOWN	866-750-7482
TDD	440-526-5332

INDIVIDUAL DECLARATION OF EXEMPTION

	N OF EXEMPTION	Tax Year _
CIAL SECURITY NUMBER	SPOUSE'S SOCIAL SECURITY NUMBER	
ST NAME	M.I. LAST NAME	
OUSE'S FIRST NAME	M.I. SPOUSE'S LAST NAME (IF DIFFERENT)	
500201110111111112		
RRENT STREEET NUMBER STREET NAME		
Y NAME	STATE	ZIP CODE
Y PHONE	EVENING PHONE	
·	file a municipal income tax return for the year sh	nown above because
(Plea	file a municipal income tax return for the year shase CIRCLE the number of the statement that best applies to you) ntire year. (Enclose page 1 of your Federal Form 1040)	nown above because
(Plea	ase CIRCLE the number of the statement that <u>best</u> applies to you) Intire year. (Enclose page 1 of your Federal Form 1040) ORCES (including the National Guard) and had no other taxable	
(Pleas I had NO TAXABLE INCOME for the error I was a member of the U. S. ARMED FO of the tax year. (Not including civilian	ase CIRCLE the number of the statement that <u>best</u> applies to you) Intire year. (Enclose page 1 of your Federal Form 1040) ORCES (including the National Guard) and had no other taxable	e income for all
(Pleas I had NO TAXABLE INCOME for the error I was a member of the U. S. ARMED FO of the tax year. (Not including civilian	nse CIRCLE the number of the statement that <u>best</u> applies to you) Intire year. (Enclose page 1 of your Federal Form 1040) ORCES (including the National Guard) and had no other taxable as employed by the military)	e income for all
I had NO TAXABLE INCOME for the er I was a member of the U. S. ARMED FO of the tax year. (Not including civilian I was UNDER AGE 18 for the entire year I am a RETIRED individual receiving onl	ntire year. (Enclose page 1 of your Federal Form 1040) ORCES (including the National Guard) and had no other taxable as employed by the military) ar. (Enclose a copy of your Birth Certificate or Driver's License). If y pension, social security, interest, or dividend income.	e income for all Date of Birth://_ MM / DD / YY
I had NO TAXABLE INCOME for the er I was a member of the U. S. ARMED FO of the tax year. (Not including civilian I was UNDER AGE 18 for the entire year)	ntire year. (Enclose page 1 of your Federal Form 1040) ORCES (including the National Guard) and had no other taxable as employed by the military) ar. (Enclose a copy of your Birth Certificate or Driver's License). If y pension, social security, interest, or dividend income.	e income for all Date of Birth: ——/——/—
I had NO TAXABLE INCOME for the er I was a member of the U. S. ARMED FO of the tax year. (Not including civilian I was UNDER AGE 18 for the entire year I am a RETIRED individual receiving onl (Enclose page 1 of your Federal Form 104)	ase CIRCLE the number of the statement that best applies to you) Intire year. (Enclose page 1 of your Federal Form 1040) ORCES (including the National Guard) and had no other taxable as employed by the military) ar. (Enclose a copy of your Birth Certificate or Driver's License). If the pension, social security, interest, or dividend income.	e income for all Date of Birth://_ MM / DD / YY
I had NO TAXABLE INCOME for the er I was a member of the U. S. ARMED FO of the tax year. (Not including civilian I was UNDER AGE 18 for the entire year I am a RETIRED individual receiving onl (Enclose page 1 of your Federal Form 104)	ase CIRCLE the number of the statement that best applies to you) Intire year. (Enclose page 1 of your Federal Form 1040) ORCES (including the National Guard) and had no other taxable as employed by the military) ar. (Enclose a copy of your Birth Certificate or Driver's License). If y pension, social security, interest, or dividend income. The municipality. (Enclose proof of new address)	e income for all Date of Birth://_ MM / DD / YY Date Retired:// MM / DD / YY
I had NO TAXABLE INCOME for the er I was a member of the U. S. ARMED FO of the tax year. (Not including civilian I was UNDER AGE 18 for the entire year I am a RETIRED individual receiving onl (Enclose page 1 of your Federal Form 104). Prior to January 1, I MOVED from a RIT	ase CIRCLE the number of the statement that best applies to you) Intire year. (Enclose page 1 of your Federal Form 1040) ORCES (including the National Guard) and had no other taxable as employed by the military) ar. (Enclose a copy of your Birth Certificate or Driver's License). If y pension, social security, interest, or dividend income. The municipality. (Enclose proof of new address)	e income for all Date of Birth://_ MM / DD / YY Date Retired:/_/ MM / DD / YY
I had NO TAXABLE INCOME for the er I was a member of the U. S. ARMED FO of the tax year. (Not including civilian I was UNDER AGE 18 for the entire year I am a RETIRED individual receiving onl (Enclose page 1 of your Federal Form 104 Prior to January 1, I MOVED from a RIT Previous Address	ase CIRCLE the number of the statement that best applies to you) Intire year. (Enclose page 1 of your Federal Form 1040) ORCES (including the National Guard) and had no other taxable as employed by the military) Interest of the statement that best applies to you) ORCES (including the National Guard) and had no other taxable as employed by the military) Interest or Driver's License). Interest or Driver's License). Interest or Driver's License). Interest or Driver's License). Interest or Driver's License or Driver's L	e income for all Date of Birth://_ MM / DD / YY Date Retired:/_/ MM / DD / YY
I had NO TAXABLE INCOME for the er I was a member of the U. S. ARMED FO of the tax year. (Not including civilian I was UNDER AGE 18 for the entire yea I am a RETIRED individual receiving onl (Enclose page 1 of your Federal Form 104 Prior to January 1, I MOVED from a RIT Previous Address Street # and name Taxpayer is DECEASED. (Enclose copy	Asse CIRCLE the number of the statement that best applies to you) Intire year. (Enclose page 1 of your Federal Form 1040) ORCES (including the National Guard) and had no other taxable as employed by the military) Interest of December 1040 Interest of December 1040 City State Zip Or of Death Certificate)	e income for all Date of Birth:/ MM / DD / YY Date Retired:/ MM / DD / YY Date of Move:/ MM / DD / YY ate of Death:/ MM / DD / YY
I had NO TAXABLE INCOME for the er I was a member of the U. S. ARMED FO of the tax year. (Not including civilian I was UNDER AGE 18 for the entire yea I am a RETIRED individual receiving onl (Enclose page 1 of your Federal Form 104 Prior to January 1, I MOVED from a RIT Previous Address Street # and name Taxpayer is DECEASED. (Enclose copy	ase CIRCLE the number of the statement that best applies to you) Intire year. (Enclose page 1 of your Federal Form 1040) ORCES (including the National Guard) and had no other taxable as employed by the military) Intr. (Enclose a copy of your Birth Certificate or Driver's License). In the pension, social security, interest, or dividend income. Intr. (Enclose proof of new address) City State Zip Intr. of Death Certificate) Death Certificate Death Spouse and their name and social security number are indicated.	e income for all Date of Birth:/ MM / DD / YY Date Retired:/ MM / DD / YY Date of Move:/ MM / DD / YY ate of Death:/ MM / DD / YY

Refunds can be requested by submitting a form 10A found at www.ritatohio.co THE BELOW SIGNED DECLARES THAT THIS EXEMPTION IS TRUE, CORREC Taxpayer's Signature DATE Spouse's Signature DATE

7.