

Name _____
Job/PCN Applying For: _____

ATTACHMENT TO APPLICATION

1. Please list any of your business associates who are employed by the Ohio Department of Taxation. Business associates are defined as parties who are joined together in a relationship for business purposes or acting together to pursue a common business purpose or enterprise.

Name (s)

() No, I have no business associates who are employed by the Ohio Department of Taxation.

2. Please list the names and relationship of any employees in this agency who are closely related to you by blood or marriage. This is defined to include, but is not limited to, a spouse, children (whether dependent or not), parents, grandparents, siblings, and other persons related by blood or marriage and residing in the same household.

Name (s)

Relationship

() No, I have no family members as defined above who are employed by the Ohio Department of Taxation.

Signature of Applicant: _____

Subscribed and duly sworn before me according to law, by the above named applicant this

_____ day of _____, _____ at _____,

County of _____ and State of _____.

Signature of Officer: _____

Official Title: _____