

1

DECLARATION OF ESTIMATED INCOME TAX. GIBSONBURG, OHIO

DUE APRIL 30

For the calendar year indicated or fiscal period beginning _____ 200_____ and ending _____ 200_____

TAX RATE 1%

PLEASE INSERT NAME & ADDRESS

NAME: _____

C/O: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

- 1. Total income subject to Gibsonburt Tax \$ _____
- 2. Estimated Tax (1% of amount on liine 1)..... \$ _____
- 3. Less Gibsonburg Tax to be withheld \$ _____
- 4. Previous payments if this is an amended Dec. \$ _____
- 5. Less other Credits (specify)..... \$ _____
- 6. Total credits (total of lines 3, 4, 5, and 6)..... \$ _____
- 7. Net unpaid estimated Gibsonburg Tax \$ _____
- 8. Amount Paid with this declaration (1/4 of line 8)
Due April 30..... \$ _____

PAY TAX WHEN IT IS DUE. NO REMINDER WILL BE SENT.

ADDRESS ALL CORRESPONDENCE CONCERNING THIS FORM TO:

INCOME TAX DEPARTMENT
120 N. MAIN ST.
GIBSONBURG, OHIO 43431

MAKE CHECK OF MONEY ORDER PAYABLE TO:
VILLAGE OF GIBSONBURG, INCOME TAX

X

TAXPAYER OR REPRESENTATIVE

DATE

2

DECLARATION OF ESTIMATED INCOME TAX. GIBSONBURG, OHIO

DUE JUNE 30

For the calendar year indicated or fiscal period beginning _____ 200_____ and ending _____ 200_____

TAX RATE 1%

PLEASE INSERT NAME & ADDRESS

NAME: _____

C/O: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

- 1. Total income subject to Gibsonburt Tax \$ _____
- 2. Estimated Tax (1% of amount on liine 1)..... \$ _____
- 3. Less Gibsonburg Tax to be withheld \$ _____
- 4. Previous payments if this is an amended Dec. \$ _____
- 5. Less other Credits (specify)..... \$ _____
- 6. Total credits (total of lines 3, 4, 5, and 6)..... \$ _____
- 7. Net unpaid estimated Gibsonburg Tax \$ _____
- 8. Amount Paid with this declaration (1/4 of line 8)
Due June 30 \$ _____

PAY TAX WHEN IT IS DUE. NO REMINDER WILL BE SENT.

ADDRESS ALL CORRESPONDENCE CONCERNING THIS FORM TO:

INCOME TAX DEPARTMENT
120 N. MAIN ST.
GIBSONBURG, OHIO 43431

MAKE CHECK OF MONEY ORDER PAYABLE TO:
VILLAGE OF GIBSONBURG, INCOME TAX

X

TAXPAYER OR REPRESENTATIVE

DATE

3

DECLARATION OF ESTIMATED INCOME TAX. GIBSONBURG, OHIO

DUE SEPTEMBER 30

For the calendar year indicated or fiscal period beginning _____ 200_____ and ending _____ 200_____

TAX RATE 1%

PLEASE INSERT NAME & ADDRESS

NAME: _____

C/O: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

- 1. Total income subject to Gibsonburt Tax \$ _____
- 2. Estimated Tax (1% of amount on liine 1)..... \$ _____
- 3. Less Gibsonburg Tax to be withheld \$ _____
- 4. Previous payments if this is an amended Dec. \$ _____
- 5. Less other Credits (specify)..... \$ _____
- 6. Total credits (total of lines 3, 4, 5, and 6)..... \$ _____
- 7. Net unpaid estimated Gibsonburg Tax \$ _____
- 8. Amount Paid with this declaration (1/4 of line 8)
Due September 30 \$ _____

PAY TAX WHEN IT IS DUE. NO REMINDER WILL BE SENT.

ADDRESS ALL CORRESPONDENCE CONCERNING THIS FORM TO:

INCOME TAX DEPARTMENT
120 N. MAIN ST.
GIBSONBURG, OHIO 43431

MAKE CHECK OF MONEY ORDER PAYABLE TO:
VILLAGE OF GIBSONBURG, INCOME TAX

X

TAXPAYER OR REPRESENTATIVE

DATE

4

DECLARATION OF ESTIMATED INCOME TAX. GIBSONBURG, OHIO

DUE DECEMBER 31

For the calendar year indicated or fiscal period beginning _____ 200_____ and ending _____ 200_____

TAX RATE 1%

PLEASE INSERT NAME & ADDRESS

NAME: _____

C/O: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

- 1. Total income subject to Gibsonburt Tax \$ _____
- 2. Estimated Tax (1% of amount on liine 1)..... \$ _____
- 3. Less Gibsonburg Tax to be withheld \$ _____
- 4. Previous payments if this is an amended Dec. \$ _____
- 5. Less other Credits (specify)..... \$ _____
- 6. Total credits (total of lines 3, 4, 5, and 6)..... \$ _____
- 7. Net unpaid estimated Gibsonburg Tax \$ _____
- 8. Amount Paid with this declaration (1/4 of line 8)
Due December 31 \$ _____

PAY TAX WHEN IT IS DUE. NO REMINDER WILL BE SENT.

ADDRESS ALL CORRESPONDENCE CONCERNING THIS FORM TO:

INCOME TAX DEPARTMENT
120 N. MAIN ST.
GIBSONBURG, OHIO 43431

MAKE CHECK OF MONEY ORDER PAYABLE TO:
VILLAGE OF GIBSONBURG, INCOME TAX

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TAXPAYER OR REPRESENTATIVE

DATE