## Federal Privacy Act Notice

Because we require you to provide us with a Social Security number, the *Federal Privacy Act of 1974* requires us to inform you that providing us with your Social Security number is mandatory. Ohio Revised Code sections 5703.05, 5703.057 and 5747.08 authorize us to request this information. We need your Social Security number in order to administer this tax.

**2011 Ohio SD 40P**

# SD 40P

**School District Income Tax Payment Voucher**

**DO NOT STAPLE YOUR PAYMENT TO THIS VOUCHER. DO NOT SEND CASH.**

**Do NOT fold check or voucher.**

**2011SP**

| First name | M.I. | Last name |
|---|---|---|
| Spouse's first name (only if joint filing) | M.I. | Last name |
| Address | | |
| City, state, ZIP code | | |

Please use UPPERCASE letters to print the first three letters of

School district number

Taxpayer's last name

Spouse's last name (only if joint filing)

Your Social Security number

Spouse's Social Security number (only if joint filing)

Include this voucher and paper check or money order (payable to School District Income Tax) with your school district income tax return and mail to School District Income Tax, P.O. Box 182389, Columbus, OH 43218-2389. Write the last four digits of the taxpayer's Social Security number on the check or money order.

**AMOUNT OF PAYMENT** $ .00

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