

**DECLARATION OF ESTIMATED WARREN, OHIO, CITY INCOME TAX**

FOR THE PERIOD FROM JANUARY 1, \_\_\_\_\_ THROUGH DECEMBER 31, \_\_\_\_\_

OR FISCAL PERIOD BEGINNING \_\_\_\_\_ THROUGH \_\_\_\_\_

• ALL TAXPAYERS WHO ANTICIPATE TAXABLE INCOME OF \$200.00 MUST FILE AN ESTIMATE •

**INDIVIDUAL DUE DATES:**

APRIL 15  
JUNE 15  
SEPTEMBER 15  
DECEMBER 15

**NON-INDIVIDUAL DUE DATES:**

APRIL 15  
JUNE 15  
SEPTEMBER 15  
DECEMBER 15

	SOCIAL SECURITY# (H)
	SOCIAL SECURITY # (W)
	FED. I.D.#

PLEASE PRINT NAME, ADDRESS, AND SOCIAL SECURITY OR FEDERAL I.D.#

1. Total Estimated Income Subject to Warren, Ohio, City Income Tax .....		
2. ESTIMATED WARREN, OHIO, CITY INCOME TAX (2.5%)		
3. Less: <i>ESTIMATED WARREN, OHIO, CITY INCOME TAX to be withheld during year</i> .....		
4. BALANCE OF WARREN, OHIO, CITY INCOME TAX DECLARED		
5. LESS CREDITS: a. Overpayment claimed on previous year's return		
b. Previous payments, if this is an amended estimate .....		
6. UNPAID BALANCE of net tax due .....		
ATTACH CHECK OR M.D. FOR AMOUNT DUE WITH THIS DECLARATION (22%, PMT DUE BY 4/15) .....		

SOCIAL SECURITY NUMBER:	I.D. NUMBER:	I CERTIFY THAT THIS IS A CORRECT DECLARATION, SUBJECT TO AMENDMENT AS PROVIDED IN THE ORDINANCE	
_____	_____	SIGNATURE OF TAXPAYER	DATE