

Individual Municipal Income Tax Drop-Off Sheet

Step 1: General Information

Name:			
Current Street Address or P.0	D. Box Number:		
City, State and ZIP Code:			
Social Security Number (Last	4 digits only): XXX-XX-	Tax Year:	
Filing status: □ Single or married filin □ Joint Spouse Nam	g separately ne:	Spouse SSN: XXX	-XX
	or P.O. Box Number:		
☐ You are retired. Prov ☐ Your spouse is retired	e situation applies to you: ovide Date of Birth: (i ide retirement date: I. Provide Spouse retirement da al Taxable Income to report for th	te:	ense or birth certificate)
Step 2: Documentation	Documents will NOT be return	ned)	
Include copies of the following	g documents, in an envelope, if	applicable to your situation:	
 W-2Gs Gambling Winning Schedule C – Profit or Los Schedule E – Supplement 	o be filed with Employee's City o s (include the copies to be filed v s from Business * al Income and Loss (includes Re MISC, Schedule F-Profit or Loss	with Employee's City or Local Ta	
* Include first two pages of yo	our Federal Form 1040 and Sche	edule 1.	
Signature		Date:	
May RITA call you if there a	re questions? □ Yes □ No	Contact Phone Number: _	
Put this sheet with your t	tax documents in an envelo	pe and drop-off at:	
Brecksville 10107 Brecksville Road Brecksville, OH 44141	Cleveland Heights Cleveland Heights City Hall ** 40 Severance Circle Cleveland Heights, OH 44118	Mentor Mentor Municipal Center * 8500 Civic Center Boulevard Mentor, OH 44060	Save a trip? Mail this sheet and your tax documents to the following address: RITA
Worthington 760 Lakeview Plaza Blvd #400 Worthington, OH 43085	Xenia Xenia Administration Building ** 107 E. Main Street	Youngstown 2761 Salt Springs Road Youngstown, OH 44509	PO Box 477900 Broadview Heights, OH 44147-7900

* Located inside - 1st Floor Lobby (Available 8:00 am - 5:00 pm, Monday-Friday) ** Located outside City Hall, beside utility payment box

Xenia, OH 45385