## FORMIR

## **VILLAGE OF DESHLER**

## Income Tax Return For the Calendar Year 20\_\_\_

FILE WITH
VILLAGE OF DESHLER
INCOME TAX DEPARTMENT
101 E. Main Street
Deshler, OH 43516

FILING REQUIRED EVEN IF NO TAX DUE.

IF MOVED SINCE THE PREVIOUS FINAL RETURN WAS DUE GIVE DATE:

MAKE CHECK OR MONEY	ORDE
PAYABLE TO	

VILLAGE OF DESHLER

ON OR BEFORE APRIL, 15TH	INTO CITY	OR OUT OF		
		DOV	OLL BENT OF OWN?	
		NAM	OU RENT OR OWN? E AND ADDRESS OF LANDLORD (if a	analicable)
VP.VI500 VV.VI5 VV.VI5 VV.VI500		IAVIA	E AND ADDRESS OF LANDLORD (II &	
XPAYERS NAME AND ADDRESS				
				-
		ACCC	DUNT NO.	[
		PHON	E NUMBER	
		soci	AL SECURITY NUMBERS:	
		TAX	PAYER	
FACIL CODIED OF ALL WILLEDING		S	AL SECURITY NUMBERS:  PAYER  POUSE	
ACH COPIES OF ALL W-2 FORMS				
	NUSES, COMMISSIONS & OTHER (	CUMPENSATION RECEIVED BEFORE	E PAYROLL DEDUCTIONS \$	
OTHER TAXABLE INCOME:  A. BUSINESS PROFIT OR LOSS (Attack	h Codoral Forme)			
A. BUSINESS PROFIT OR LOSS (Attac) B. RENTAL INCOME (Attach Federal Fo				
	-		·	
TE: Business or renial losses may not	- -	V	······································	
			\$	
•	•		\$	
CREDITS				
A. DESHLER INCOME TAX WITHHELD .		•		
B. OVERPAYMENT FROM PRIOR YEA				
C. ESTIMATED TAX PAYMENTS		, ,		
			\$	
			\$	
			\$	
			\$	
OVERPAYMENT TO BE REFUNDED \$	OR CREDITED \$ .	TO NEXT YEAR ES	TIMATE.	
NOTE: No taxes or refunds of less than \$10	0.00 shall be collected or refunded.			
	DECLARATION OF ESTIMA	<del></del>		
Total income subject to Deshler tax \$	2. Des	hler tax @ 1%	\$	
LESS TAX TO BE WITHHELD				
a. By a Deshler Employer				
b. By an employer in			· · · · · · · · · · · · · · · · · · ·	
			\$ <u></u>	
Less Credits: a. Overpayment on pr				
		\$		
			<b>\$</b>	
Amount paid with this return (not le			Make Remittance Payable t	lo;
Balance of Tax		\$	VILLAGE OF DESHLER	
			itements, and to the best of my know ormation of which preparer has any l	
	, , , , , , , , , , , , , , , , ,	. , ,	· Frakers man and	<del></del>
ignature of Person Preparing if Other Than 1	Taxpayer Date	Signature of Taxpayer or Agent		Date
		-	- Invitation Activities - Labor.	
Address	Phone No.	Spouse Signature		Date