

MAIL TO: CITY OF TIFFIN

INCOME TAX DEPARTMENT 53 EAST MARKET STREET

P.O. BOX 518 TIFFIN, OH 44883 PHONE: 419-448-5405
FAX: 419-448-5406
WEB: www.tiffinohio.gov
EMAIL: taxinfo@tiffinohio.gov

INDIVIDUAL DECLARATION OF EXEMPTION

| SOCIAL SECURITY NUMBER | | SPOUSE SOCIAL SECURITY NUMBER | | |
|------------------------|--|-------------------------------|----------------|--|
| FIRST N | AME MI_ | LAST NAME | | |
| SPOUSE | FIRST NAME MI | SPOUSE LAST NAME | | |
| CURREN | NT ADDRESS | CITY | STATE ZIP CODE | |
| DAYTIM | E PHONE NUMBER | EVENING PHONE NUM | BER | |
| IAM | NOT REPORTING TAXABLE INCOME FOR | 2024 BECAUSE: | | |
| 1 | I had NO TAXABLE INCOME for the entire year Federal Form 1040, if filed, or list source of non | , ,, , , | · | |
| 2 | I was a member of the ARMED FORCES , including the National Guard, of the United States for all of 2024, and had no other taxable income. (This does not include civilians employed by the military). | | | |
| 3 | I was UNDER THE AGE OF 18 for all of 2024 (Attach copy of Birth Certificate or Driver's Lice | | te of Birth | |
| 4 | I am a RETIRED individual receiving only pension, social security, interest, dividends, | | | |
| | or other non-taxable income for all of 2024 | Da | ate Retired | |
| | (Attach a copy of page 1 of your 2024 Federal Form 1040 if filed). | | | |
| 5 | Prior to January 1, 2024, I moved from Tiffin (Indicate previous address below) Previous Address | | ite of Move | |
| 6 | Taxpayer is deceased | Date of Death | | |
| 7 | I am filing a 2024 Tiffin return jointly with my spouse | | | |
| | | Spouse's Name | Spouse's SSN | |
| Signatu | re Date | Spouse's Signature | Date | |

THE ABOVE SIGNED DECLARES UNDER PENALTY OF PERJURY THAT THIS RETURN IS TRUE, CORRECT AND COMPLETE FOR TAX YEAR 2024.