

VILLAGE OF LEIPSIC
Individual Declaration of Estimated Income Tax
For Tax Year _____

Soc. Sec No: _____ - _____ - _____ Spouse's Soc Sec No. _____ - _____ - _____

Name: _____

Spouse Name: _____

Address:# _____ Suite: _____

Street Name: _____

City: _____ State: _____ Zip: _____ - _____

Signature Date Home Phone #

Signature Date Business Phone #

(If filing jointly, BOTH must sign even if only one had income)

- | | |
|--|----------|
| 1. Estimated Income Subject to Tax \$ _____ @ 1.5% _____ | 1. _____ |
| 2. Tax Withheld by your Employer(s) | 2. _____ |
| 3. Overpayment applied from 2015 | 3. _____ |
| 4. Other Payments and Credits | 4. _____ |
| 5. Total Payments and Credits(Add Lines 2, 3 and 4) | 5. _____ |
| 6. Net Estimated Tax Due (Line 1 minus Line 5) | 6. _____ |
| 7. Estimate Due By April 30, 2016 (22.5% of Net Tax Due) | 7. _____ |

Remit to: The Village of Leipsic
Income Tax Department
142 E. Main St.
Leipsic, OH 45856
419-943-2492