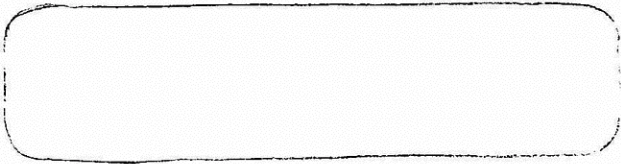


INDIVIDUAL QUESTIONNAIRE

For the purpose of correct Newton Falls Income Tax records, typewrite or print plainly, and answer all questions to enable us to establish accurate records.

THIS QUESTIONNAIRE MUST BE COMPLETED AND RETURNED TO THE INCOME TAX OFFICE WITHIN 10 DAYS



RETURN TO:  
CITY INCOME TAX OFFICE  
419 North Center St  
NEWTON FALLS, OHIO 44444

MONDAY THROUGH FRIDAY  
8:00 a.m. to 4:30 p.m.

TAX RATE 1%

DATE YOU MOVED INTO NEWTON FALLS CITY LIMITS \_\_\_\_\_ SINGLE \_\_\_\_\_ MARRIED \_\_\_\_\_

NAME: \_\_\_\_\_ SPOUSE: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_ OWN \_\_\_\_\_ RENT \_\_\_\_\_  
CITY: \_\_\_\_\_ LANDLORD'S NAME: \_\_\_\_\_  
SOCIAL SECURITY NUMBER (HUSBAND) \_\_\_\_\_ LANDLORD'S ADDRESS: \_\_\_\_\_  
SOCIAL SECURITY NUMBER (WIFE) \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ HAVE YOU EVER FILED FOR NEWTON FALLS  
WIFE'S BIRTH \_\_\_\_\_ CITY INCOME TAX BEFORE? \_\_\_\_\_ If yes, when \_\_\_\_\_

1. Are you employed? Yes \_\_\_\_\_ No \_\_\_\_\_ Spouse Yes \_\_\_\_\_ No \_\_\_\_\_

2. List sources of income and/or employees:

NAME AND ADDRESS OF YOUR EMPLOYER, OR SOURCE OF INCOME: (HUSBAND)

( ) \_\_\_\_\_

NAME AND ADDRESS OF YOUR EMPLOYER, OR SOURCE OF INCOME: (WIFE)

( ) \_\_\_\_\_

PLEASE MARK "X" IN BOX AT LEFT OF EMPLOYER'S NAME IF HE IS DEDUCTING CITY INCOME TAX FROM YOUR PAY. TO-WHAT CITY IS TAX BEING PAID? \_\_\_\_\_

Children 18 or over, or other adult members of household, and where employed?  
\_\_\_\_\_

3. If you are unemployed, please mark "X" in the box before the statement which most accurately describes your position:

( ) Temporary unemployment ( ) Permanent unemployment ( ) Welfare

IF PERMANENTLY UNEMPLOYED, MARK "X" IN THE BOX LEFT OF FOLLOWING REASONS:

( ) Retired ( ) Disability ( ) Other Reasons (specify) \_\_\_\_\_

IF PERMANENTLY UNEMPLOYED SEND PROOF OF RETIREMENT OR DISABILITY AND WE WILL CLOSE YOUR ACCOUNT

OVER

4. Do you have gross rental income from real estate, including farms, exceeding \$100.00 per month? Yes \_\_\_\_\_ No \_\_\_\_\_  
Address(es) of property(s) and date(s) purchased: \_\_\_\_\_  
\_\_\_\_\_

ALL RESIDENTS 18 YEARS OF AGE AND OVER MUST FILE A FINAL RETURN, REGARDLESS OF EMPLOYMENT STATUS: WORKING, UNEMPLOYED, ON ADC, ARMED SERVICE ACTIVE DUTY, ETC. FINAL RETURNS WILL BE MAILED EACH JANUARY: HOWEVER, FAILURE TO RECEIVE A FORM DOES NOT EXEMPT ANY PERSON FROM FILING. DUE DATE APRIL 15th OF EACH YEAR

SIGNATURE: \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_

MEMO FOR COMMENTS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

INFORMATION REGARDING NEWTON FALLS CITY  
INCOME TAX

Tax Rate 1%

Newton Falls residents, 18 years of age and older are required to register and report income with the Newton Falls Income Tax Department, whether or not city income tax is withheld from wages.

Newton Falls allows tax credit for taxes withheld and/or paid to another city or village up to and including 1% only. Return must be filed by April 15th of each year.

If the full 1% is not being withheld, an estimate must be filed by April 15th of each year and paid quarterly. The first quarterly payment must accompany the estimate. Quarterly statements will then be mailed in June, September and December.

If total gross rents received in any month amount to \$100.00 or more, the total net income is subject to the tax for that year.