

City of Moraine
Income Tax Department
4200 Dryden Rd.
Moraine, Ohio 45439

****2009 Refund Request****

Part I - To be Completed By Claimant (See Reverse Side For Instructions)

Name and Present Address Social Security No.

_____ Phone #: _____

Address during claim period _____

A. Employer's name and address

B. Income earned * * * * * \$ _____

C. Moraine Tax withheld (attach W-2) \$ _____

D. Earnings subject to Moraine Tax \$ _____

E. Moraine Tax (2.0% of line D) \$ _____

F. Overpayment claimed (C minus E) \$ _____

Basis for Refund: Claimant must provide all pertinent information and facts on which this claim is based. Use reverse side of form or separate attachment for proper information to further explain your claim.

Certification: (Read carefully)

I certify that all facts and figures given are true and complete; a refund has not previously been claimed. I authorize the City of Moraine to, upon request, furnish my City of residence/ or employment, a copy of this refund document.

Signed: _____ Date: _____

Notice: THIS REFUND MAY RESULT IN AN AMENDMENT TO FEDERAL, STATE, AND MUNICIPAL TAX RETURNS.

Part II - Employer's Certification

I verify that during _____ the above named employee was working outside the City of Moraine for _____ days and that _____% of the employees earnings are attributable to work outside of Moraine. These days DO NOT INCLUDE VACATION, SICK, PERSONAL, OR HOLIDAYS! ! !

Employer Signature Print Name

Title Telephone # Date

Instructions for Part I (TO BE COMPLETED BY CLAIMANT)

ATTACH A COPY OF WAGE STATEMENT-(W-2) SHOWING MORaine TAX WITHHELD.

LINE A - List employer's name and address where you worked.

LINE B - Enter income from W-2's

LINE C - Enter the Moraine tax withheld

LINE D - Enter income attributable to work done or services performed within the corporate limits of Moraine. If all services were performed outside of Moraine, enter "NONE".

LINE E - Compute the tax on the income attributable to Moraine.

LINE F - Enter the difference between lines C and E

BASIS FOR REFUND: If a percentage of time or income is used, show the method used for computing such percentage. If number of days worked out of Moraine is used, attach a list of showing the dates and locations you worked out of the City limits. (You are responsible for paying the cities listed on this attachment the proper amount of tax due their cities.)

Use 260 days for total working year as Saturdays and Sundays ARE NOT CONSIDERED WORKING DAYS.

INSTRUCTIONS FOR PART II (To be completed by Employer)

The employee's refund claim can not be honored without the employer's verification of total Compensation, Moraine tax withheld, the employee's address during the period covered by this refund request, and the amount of earnings or percentage of the time attributable to work done or services performed outside the corporate limits of Moraine and not subject to Moraine tax.

Explain method used and show computation of percentage entered in part II on reverse side.

PRIVACY ACT: It is determined the information required is necessary to protect the City of Moraine in expenditure of funds as authorized by Codified Ordinance 181.11(b) City of Moraine Refunds.