OFFICE USE

FOR TAX YEAR

APPLICATION FOR REFUND City of Akron INCOME TAX



____ (2106 Expense or Underage filers)

| Print Name & Address Below: | | | Telephone Number | |
|--|---|--|--|--|
| | | | Work | |
| | | | | |
| | | | | |
| | | | SS# | |
| Enter total compensation re | eceived before ar | ny payroll deductions (att | ach copies of W-2's) | \$ |
| Print Employer Name | Dept Name or # | City Where Employed | | Work Location (Address) |
| | | | | |
| | | | | |
| We will calcu Refunds are typically isso Application, plus a copy year following the tax ye YOU MUST ATTACH CO | late and is ued within 90 d of your employ ar at issue, which opples OF W-2' asigned to the above | lays after: i) the date the yer's complete and accepted and accepted and accepted as the series are series as the series and accepted as the series are series as the series as the series and accepted as the series are series are series as the series are series as the series are series are series as the series are series as the series are serie | ased on the te City has received the as a received the AW-3 recond WAGES AND AKE | information provided. I a complete and accurate Refund ciliation form; or ii) April 15th of the RON INCOME TAXES WITHHELD. Out the date you were assigned bloyment was terminated. |
| (I worked in Akron from | | | to | |
| | | | | g documents, and to the best of my record of my taxable income to Akron. |
| Signature of Taxpayer | | | Date | |
| Return completed form to: | Income Tax | Division, 1 Cascade | Plaza - Suite 100. | Akron, OH 44308-1161 |