

**INDIVIDUAL - 2008  
INCOME TAX RETURN  
SPENCERVILLE  
Due Date 04/15/2009**

**MAKE CHECK OR MONEY ORDER TO:**  
VILLAGE OF SPENCERVILLE INCOME TAX DEPARTMENT  
PO BOX 57  
Spencerville OH 45887

Voice 419-647-4171 Fax 419-647-2024  
www.spencervilleoh.com

Taxpayer's Social Security No.	
HomeTelephone No.	BusinessTelephone No.
Spouse's Social Security No.	
Spouse's Name	
HomeTelephone No.	BusinessTelephone No.
<b>Filing Status</b> <input type="checkbox"/> Single <input type="checkbox"/> Married filing joint <input type="checkbox"/> Married filing separate	
<input type="checkbox"/> RESIDENT <input type="checkbox"/> NON-RESIDENT	
IF YOU HAVE MOVED DURING TAX YEAR - GIVE DATES INTO / / OUT OF / /	
IF YOU RENT, PLEASE GIVE LANDLORDS INFORMATION NAME _____ ADDRESS _____	

Name \_\_\_\_\_  
 And \_\_\_\_\_  
 Address \_\_\_\_\_

**Income**

1 Wages, salaries, tips, etc. 1

2 Other taxable income 2

3 Total taxable income (add lines 1 and 2) 3

**Tax and Credits**

4 Spencerville tax due before credits (1.250% of line 3) 4

5 Estimated tax payments made to Spencerville 5

6 Taxes withheld and paid to Spencerville 6

7 Overpayment from prior year(s) 7

8 Taxes withheld and paid to other localities 8

Credit cannot exceed 100.0% of tax withheld up to 1.25% of income earned in each location.

9 Total credits (add lines 5 through 8) 9

**Refund** ( Issued if greater than 1.00 )

10 If line 9 is greater than line 4, subtract line 4 from line 9. This is the amount you overpaid 10

11 Amount of line 10 to be credited to next years estimate 11

12 Amount of line 10 to be refunded 12

**Tax Due** ( if greater than 1.00 )

13 If line 4 is more than line 9, subtract line 9 from 4, this is the tax amount you owe 13

14 Penalties and interest **Late File** \_\_\_\_\_ **Late Pay** \_\_\_\_\_ **Late Estimate** \_\_\_\_\_ **Interest** \_\_\_\_\_ 14

**Declaration of Estimate For 2009**

15 Estimated income 15

16 Estimated tax due. Multiply line 15 by 1.250% 16

17 Taxes to be withheld and paid to Spencerville and other localities 17

18 Prior credit applied to estimated tax payments (From line 11) 18

19 Net estimated tax due (subtract line 17 and 18 from 16) 19

20 Minimum amount due for first quarter (multiply line 19 by 25%) 20

**Amount You Owe**

21 Total amount due (add lines 13, 14 and 20) 21

**Tax Office Use Only : Tax Office Use Only : Tax Office Use Only**

\_\_\_\_\_  
Taxpayer's Signature Date

\_\_\_\_\_  
Spouse's Signature Date

\_\_\_\_\_  
Tax Preparer's Signature Date  
(If other than taxpayer) Phone No. \_\_\_\_\_