CLAIM FOR REFUND OF TAX WITHHELD FOR THE TIME SPENT OUTSIDE PERRYSBURG AS A NON-RESIDENT OF PERRYSBURG DURING 2023

W-2(s) MUST BE ATTACHED

Applicant's Statement

During the period _____, 2023, through _____, 2023, I was employed by _____, working as a _____. My employer compensated me in the amount of $_____ and withheld from such compensation Perrysburg City income taxes in the amount of $_____. During this time my legal residence was outside the City of Perrysburg as follows:

_____	_____	_____	_____
Street Address	Circle one: City, Village, or Township	State	Zip Code

During the above period, I performed work on behalf of my employer in areas outside the City of Perrysburg as follows: (use the back of this page or attach additional pages as needed).

City and State	Exact Date(s)	City and State	Exact Date(s)
_____	_____	_____	_____
_____	_____	_____	_____

Weekends out of town are NOT to be included as days spent outside Perrysburg. Vacations, holidays, and sick days are NOT to be counted as days spent outside Perrysburg.

Total number of days spent out of town from above / Total number of work days in the year (52 x 5) _____ / 260 = _____ % of time spent out of town

_____	_____	_____	_____
Signature of Applicant	Social Security No.	Applicant's Phone No.	Date

_____	_____	_____
Present Mailing Address	City, State	Zip

Note: If you live in a municipality with an income tax, the tax office there will be notified of your refund.

I hereby assign and transfer my rights, title and interest in this refund to my city of residence and authorize my city of residence to accept this refund on my behalf.

_____
Signature of Applicant

DO NOT SIGN THIS BOX IF YOU WANT THE REFUND PAID TO YOU!!

Employer's Statement

To: Tax Commissioner City of Perrysburg
201 W. Indiana Avenue
Perrysburg, OH 43551

Under penalties of perjury, the undersigned employer states that the above employee was employed by him during the period _____, 2023, through _____, 2023, that $_____ was withheld as Perrysburg Income Tax from earnings paid said employee during that period; that he has examined this claim for a refund of $_____, including any accompanying schedules and statements and that, to the best of his knowledge and belief, this refund claim is true and correct; that the earnings claimed above were earned outside the corporate limits of the City of Perrysburg, and that no portion of said tax has been or will be refunded to said employee by this employer. ALL OF THE INFORMATION IN THIS SECTION IS REQUIRED FOR PROCESSING.

_____	_____	_____
Date	Print/Type Employee Name	Name of Employer

Certifier:

_____	_____	_____	_____
Signature of authorized agent	Title	Print/Type Certifier's Name	Certifier's Phone No.