

DECLARATION OF ESTIMATED MC COMB INCOME TAX
VILLAGE OF McCOMB, OHIO—INCOME TAX DEPARTMENT

Taxpayer name & address _____

Federal Tax ID# _____

1. Total income subject to McComb Tax _____

2. McComb Tax (1% of line 1) _____

3. Less: tax to be withheld or paid to _____

4. Balance McComb estimated tax _____

5. Less: Previous year's overpayment _____

6. Net tax due _____

7. Amount paid this filing _____
(not less than ¼ of line 6)

Make check payable to:
VILLAGE OF MCCOMB
INCOME TAX

Signature of Taxpayer _____

Date _____

-----Cut along this line -----