KIM R. PEREZ TREASURER, CITY OF CANTON cantonincometax.com City of Canton
INCOME TAX DEPARTMENT

Hours: 8:00-4:00 Monday thru Friday

MAILING ADDRESS: PO BOX 9940, CANTON, OHIO 44711 OFFICE ADDRESS: 424 MARKET N., CANTON, OHIO 44702 PHONE (330) 430-7900

Resident Information Sheet

Please Print or Type

NAME	SOCIAL SECURITY NUMBER
NAME (SPOUSE)	SOCIAL SECURITY NUMBER
ADDRESS	TELEPHONE NUMBER
CITY/STATE/ZIP	DATE OF BIRTH
DATE MOVED INTO CANTON	DATE OF BIRTH (SPOUSE)
Employers Company Name(s) and Location	Dates of Employment
19	
	ACREMINATE TO THE PROPERTY OF
19 2136 1918 3456	
19	
Is city tax withheld by employer(s)?YesN	
To what city or cities do you pay the tax?	
Are you self-employed?YesNo (If yes,]	please fill out business activity section on back of form)
Do you own rental property?YesNo (If	yes, please fill out rental section on back of form)
Do you have Royalty Income?Source	e of Royalty
If not employed, what is your source of income? Plea	
Interest Dividends Disability Workers Co	mpensation Alimony ADC Other (please specify)
Are you presently filing with our office or have you	
	our department under a number different from your social

Business Activities Business Activities Additional Information *** PLEASE LIST YOUR LAST THREE ADDRESSES ***	you	have moved out of Canton, p	lease indicate date mo	ved out of the	city		1217 86
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