SHOW NAME OR ADDRESS CHANGES ON REVERSE

Name			Social Security
Name of spouse if joint return			Account Number
Current address			
City	State	Zip	

I AM REQUIRED TO FILE THIS FORM SINCE I LIVE IN THE VILLAGE OF MIDDLEFIELD. I AM NOT REQUIRED TO PAY CITY INCOME TAX BECAUSE:

- 1. _____ RETIRED, received only pension, Social Security, Interest or Dividend Income
- 2. ____ AN ACTIVE MEMBER OF THE ARMED FORCES OF THE UNITED STATED FOR THE ENTIRE YEAR OF 20____. (this does not include civilians employed by the military or National Guard.)
- 3. ____ UNDER 18 FOR THE ENTIRE YEAR 20____.
- 4. ____ NO EARNED INCOME FOR THE ENTIRE YEAR 20____. (Public Assistance, Unemployment, SSI, etc.)
- 5. ____ BUSINESS CLOSED OR RENTAL PROPERTY SOLD __/_/ (date)

Do you authorize your preparer to contact us regarding this return? YES ___ NO___

SIGNATURE OF TAXPAYER

SIGNATURE OF SPOUSE, IF JOINT RETURN

(_____)____ Phone Number

DATE

SIGNATURE OF PREPARER, NOT TAXPAYER