CITY OF CANTON, OHIO
DECLARATION OF ESTIMATED TAX
AND QUARTERLY ESTIMATED PAYMENTS

ROBERT C. SCHIRACK
TREASURER
CITY OF CANTON
INCOME TAX DEPARTMENT
P.O. BOX 9940
CANTON, OHIO 44711-9940

424 MARKET AVE. N.
CANTON, OHIO 44711
330-430-7900
cantonincometax.com

IMPORTANT INFORMATION

You **must** pay estimated tax payments if:

You have or expect to have any taxable income where withholding is not done;
Local taxes of at least 1.5% are not being withheld by your employer; or
You engage in any business, profession, enterprise, or activity subject to the Income Tax where the tax is not withheld.

You **must** file the MANDATORY DECLARATION OF ESTIMATED TAX FOR 2008 below, together with the first quarter estimated tax due (1/4 of the annual estimated tax) on or before **April 30, 2008**. Additional payments of at least 1/4 of the annual estimated tax each must be paid on or before July 31, 2008. October 31, 2008 and January 31, 2009. Please send in the Quarterly Estimate Payment forms below to identify your payments. (No quarterly payment notices will be sent to remind you to make your quarterly payments, so please mark your calendars.)

A DECLARATION OF ESTIMATED TAX WHICH IS LESS THAN 75% OF THE TAX DUE ON THE FINAL RETURN WILL BE SUBJECT TO INTEREST OF 9% PER QUARTER ON THE DIFFERENCE AND A PENALTY OF $25.00.

No Declaration of Estimated Tax and no quarterly payments are required if you may reasonable expect to have less than $5,000.00 of income subject to the estimated tax this year.

You may amend your Declaration of Estimated Tax during the year in writing for good cause shown.

Record of Payments

PAYMENT NO.	DUE DATE	CHECK NO.	DATE PAID	AMOUNT DUE
1.	April 30, 2008			
2.	July 31, 2008			
3.	October 31, 2008			
4.	January 31, 2009			

MANDATORY DECLARATION OF ESTIMATED TAX FOR 2008

1. TOTAL INCOME SUBJECT TO CANTON TAX $ _____ X 2% — 1. $ _____
2. LESS CREDITS — 2. $ _____
3. NET TAX DUE (LINE 1 LESS LINE 2) — 3. $ _____
4. 1/4 OF LINE 3 IS YOUR ESTIMATE AMOUNT — 4. $ _____

Robert C. Schirack, Treasurer
CITY OF CANTON
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CITY OF CANTON, OHIO
QUARTERLY ESTIMATE PAYMENT COUPON
2008 1st Quarter

AMOUNT PAID $ _____

Taxpayer Soc. Sec. No.	Account Number	Due on or Before
		4-30-2008

Name & Address

TO CHARGE YOUR PAYMENT, PLEASE COMPLETE.

$ _____ (Amount Authorized) ❑ VISA ❑ MasterCard

CREDIT CARD EXPIRATION DATE _____ / _____

_____
CARDHOLDER

Robert C. Schirack, Treasurer
CITY OF CANTON
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CITY OF CANTON, OHIO
QUARTERLY ESTIMATE PAYMENT COUPON
2008 2nd Quarter

AMOUNT PAID $

Taxpayer Soc. Sec. No.	Account Number	Due on or Before
		7-31-2008

Name & Address

TO CHARGE YOUR PAYMENT, PLEASE COMPLETE.

$ _____ ❑ VISA ❑ MasterCard
(Amount Authorized)

CREDIT CARD EXPIRATION DATE _____ / _____

_____
CARDHOLDER

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CITY OF CANTON, OHIO
QUARTERLY ESTIMATE PAYMENT COUPON
2008 3rd Quarter

AMOUNT PAID $

Taxpayer Soc. Sec. No.	Account Number	Due on or Before
		10-31-2008

Name & Address

TO CHARGE YOUR PAYMENT, PLEASE COMPLETE.

$ _____ ❑ VISA ❑ MasterCard
(Amount Authorized)

CREDIT CARD EXPIRATION DATE _____ / _____

_____
CARDHOLDER

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CITY OF CANTON, OHIO
QUARTERLY ESTIMATE PAYMENT COUPON
2008 4th Quarter

AMOUNT PAID $

Taxpayer Soc. Sec. No.	Account Number	Due on or Before
		1-31-2009

Name & Address

TO CHARGE YOUR PAYMENT, PLEASE COMPLETE.

$ _____ ❑ VISA ❑ MasterCard
(Amount Authorized)

CREDIT CARD EXPIRATION DATE _____ / _____