

NEW
 CHANGE

SCHOOL AND CITY TAX / CHANGE OF ADDRESS FORM GREENON LOCAL SCHOOL DISTRICT

To comply with the law we must ask you to complete the form below and return to the payroll office.

SCHOOL DISTRICT INCOME TAX -OR- CHANGE OF ADDRESS

NAME: _____

ADDRESS: _____

CITY, STATE AND ZIP CODE: _____

PHONE NUMBER:(_____)_____

The SCHOOL DISTRICT in which you live: _____

School District Number (if known): _____

Effective Date of move (if address change): _____

District	Code
Greenon	1201
Tecumseh	1202
Northeastern	1203
Northwestern	1204
Southeastern	1205
Spfld. City	1206
Yellow Springs	2907
Clark-Shawnee	1207
Beavercreek	2901
Fairborn	2903
Xenia	2906
Huber Heights	5715

CITY INCOME TAX

Do you need to have a City Income tax withheld:

YES _____ NO _____

NOTE: If you answered "YES" please indicate which city tax to withhold:

City: _____

E-MAIL INFORMATION - FOR DIRECT DEPOSIT NOTIFICATION ONLY

I would prefer the District send my electronic direct deposit notification to my home. Effective: _____

Home E-Mail address: _____

(I understand it becomes my responsibility to notify the district of any changes to my personal e-mail)

Route to:
Payroll
Board Secretary
Technology