



MAIL ALL WORK FROM HOME REFUND F CITY OF DUBLIN DIVISION OF TAXATION PO BOX 9062 DUBLIN, OHIO 43017-0962 Taxpayer Name Social Security # Current Home Address City/State/Zip Taxpayer Email/Phone		
ENTED DUDING WAS CEC /ATTACH WAS CUE	NAMES SUBJECT AND THE STATE OF	
EMTER DUBLIN WAGES (ATTACH W2 SHO	Dublin Wages (Box 18 from W2)	Dublin Tax Withheld (Box 19 from W2)
For the entire year of 2024, I we former principal place of work, information, I am hereby requestion bublin employer while working	which is located in the City esting \$ in	. , , , , ,
ACKNOWLEDGEMENT By signing this ACKNOWLEDGEMENT, th true, correct and complete. Furthermore the City of Dublin shall be due to the mu	e, the undersigned also declares that	they are aware any monies refunded by
Signature of Taxpayer	Date	
Signature of Tax Preparer (Third Party De	signee) Date Prep	parer Phone Number
Do you authorize our office to contact yo regarding this return?	ur Third Party Designee	□Yes □No

Please note, in accordance with ORC §718.13; any refund issued by the City of Dublin will be disclosed to your taxing jurisdiction of residency.