

South Butler County School District
Annual Request For Exemption of Per Capita and Act 511 Head Tax
for the Calendar Year _____

To South Butler County School Board Directors:

I hereby petition the school board to be exempted from my per capita and Act 511 head tax based on the information submitted in this form. My signature below certifies under penalty of perjury that the information given below is true and correct to the best of my knowledge.

Signature of Applicant _____ Date _____

Applicant's Name _____ Per Capita ID Number _____
Print Name as it appears on the tax card

Date of Birth ____/____/____ Municipality _____

FINANCIAL STATUS OF APPLICANT FOR EXEMPTION

IN ORDER TO RECEIVE CONSIDERATION, **ALL** QUESTIONS BELOW MUST BE ANSWERED AND VERIFICATION OF INCOME FROM THE PRIOR CALENDAR YEAR MUST BE ATTACHED.

Are you presently employed? Yes No

Were you employed during the prior year? Yes No Income for prior year: \$ _____

If so, please list your employer's name _____

Employer's Address _____

Your total income received from all sources (salary, pension, social security, public assistance, stock, bonds, interest or any other income) during the calendar year prior to the year for which you are requesting exemption must be less than \$5,000 qualify for exemption.

Proof of Income Attached:

_____ W-2 Form _____ Federal Income Tax Return _____ Other (list specifically below)

***THIS REQUEST FOR EXEMPTION APPLIES ONLY TO THE CALENDAR YEAR LISTED ABOVE.
YOU ARE RESPONSIBLE FOR FILING THIS FORM FOR EACH YEAR IN WHICH
YOU ARE REQUESTING EXEMPTION.***