



**City of Sidney -- Estimated Tax Payment for Tax Year \_\_\_\_\_**

<b>Payment Enclosed</b>	\$ _____
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Social Security Number or Federal ID Number:

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Sidney Account No. (if known) \_\_\_\_\_

- First Quarter       Second Quarter  
 Third Quarter       Fourth Quarter  
 Payment on Account

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip       Check if address change

**Make remittance payable to CITY OF SIDNEY,**  
**REVENUE COLLECTIONS – INCOME TAX**  
 201 W Poplar St  
 Sidney, OH 45365

*For questions or assistance, please see our website [www.sidneyoh.com](http://www.sidneyoh.com), email [tax@sidneyoh.com](mailto:tax@sidneyoh.com) or call (937) 498-8111.*      FORM SQ-1  
 If receipt is desired, return this statement with a self-addressed stamped envelope. Do not remit cash by mail.