

Employee's Statement of Nonresidence in Iowa

tax.iowa.gov

Employee's Name: Social Security Number (SSN):					SN):
Address:					
City:	State:	ZIP:		Phone:	
Employer's Name:	Wartburg Colle	ge			
Address: <u>100 Wartbu</u>	ırg Blvd			· · · · · · · · · · · · · · · · · · ·	
City: <u>Waverly</u>	State:	IA ZIP: _	50677	Phone:	(319) 352-8350
Illinois income tax. Any Illinois and not to lowa. Note: If you change y information visit tax.iow Employer	wages or salary your state of res ra.gov .	made by an l	llinois resid	lent working ir	eir employer to withhold n Iowa is taxable only to ver within 10 days. For
•	ary paid in Iowa	and who clair	ms exempt		o is a resident of Illinois holding of lowa income
	_	•			certificate, that I have , correct, and complete.

Employee Signature: Date: (MM/DD/YYYY):