

Employee's Statement of Nonresidence in Iowa

tax.iowa.gov

Employee's Name:		Social Security Number (SSN)		
Address:				
City		ZIP	Phone Number	
Employer's Name:				
Address				
City	State	ZIP	Phone Number	
wages or salary in Iowa s wages or salary made by	hould complete and file an Illinois resident wor	e this form with their king in lowa is taxab	ax purposes. A resident of Illinois work employer to withhold Illinois income ta ble only to Illinois and not to Iowa. nployer within 10 days. For information	ax. Any
	wa and who claims exe		ee who is a resident of Illinois receiving olding of lowa income tax under the rec	
Declaration: I, the understocked document and, to the best			or false certificate, that I have examine rect, and complete.	d this
Employee Signature:		Date	e: (MM/DD/YYYY)	