



Department of Taxation

Please do not use staples.

MNP FBP Request to File By Paper Rev. 1/19

MNP account number FEIN

Use only UPPERCASE letters.

Reporting member's name

Primary address

City State ZIP code

Contact's first name M.I. Last name

Telephone Fax

Title E-mail

Ohio Revised Code section 718.851 requires that all MNP filers remit each tax payment and corresponding return electronically. Additionally, a person required by that section to remit taxes or file returns electronically may apply to the tax commissioner, on the form prescribed, to be excused from that requirement for good cause.

Please select and describe in detail the reason(s) the above-referenced taxpayer requests to be excluded from the electronic filing requirement. The department will respond by letter indicating either approval or denial.

- File by paper Pay by check File by paper and pay by check

Text area for describing reasons for exclusion

SIGN HERE (required)

I declare under penalties of perjury that this return or claim (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct, and complete return and report.

Signature Date Name Title

Taxpayer representative: The taxpayer will be represented in the matter by the following individual. Please attach a Declaration of Tax Representative (Ohio form TBOR 1), which can be found on the department's Web site at tax.ohio.gov.

First name M.I. Last name Telephone Title E-mail