

For Office Use Only # _____
--------------------------------

Please print or type the information below. This form must be filed on or before **March 31, 2020**.

**A**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Spouse's First Name \_\_\_\_\_ MI \_\_\_\_\_ Phone Number (\_\_\_\_) - \_\_\_\_ - \_\_\_\_\_

PEEL ADDRESS LABEL AND PLACE HERE

**B** I certify that as of December 31, 2018, I was (check only one box):

- Claimant age 65 or older
- Claimant under age 65 with a spouse age 65 or older who resided in the same household
- Widow or widower, age 50 to 64
- Permanently disabled, ages 18 to 64

**C** Municipality (check only one box):

- Brecknock  Mohnton
- Cumru  Shillington
- Kenhorst

**D**

- TOTAL INCOME received by you and your spouse during 2018  
 As listed on your 2018 PA-1000 form, Line 13 ..... 1 \_\_\_\_\_
- 2018 Governor Mifflin School District Real Estate Tax (Real Estate bill dated 7/1/18)  
 Per copy of attached receipted school tax bill (school tax only) .... 2 \_\_\_\_\_
- Property Tax Rebate issued by PA Dept. of Revenue (received in 2019/2020)  
 As listed on state rebate check ..... 3 \_\_\_\_\_
- Line 2 minus Line 3 above ..... 4 \_\_\_\_\_
- 5. Estimated Governor Mifflin School District Property Tax Rebate**  
 Using Table A, find your estimated rebate by comparing your total income listed on Line 1 to the Income Level ranges on the Table. Then compare the amount of the estimated GM rebate to the amount listed on Line 4, and enter the lesser of the two amounts on Line 5 of this form. \*\*\*The school district will not issue a rebate that when added to the state rebate exceeds the total school tax paid\*\*\*  
 5 \_\_\_\_\_

**E**

**The following documents MUST be attached:**

- Signed copy of **2018** PA-1000 form (2 pages)
- Copy of **2018** School Property Tax bill (marked as paid)
- Copy of State Rebate Check (or proof of deposit; received in & dated **2019 or 2020**)

**Table A**

Income Level	State Rebate	*Estimated GM Rebate
\$0 to \$ 8,000	\$650 / \$975	\$390.00*
\$8,001 to \$15,000	\$500 / \$750	\$300.00*
\$15,001 to \$18,000	\$300 / \$450	\$180.00*
\$18,001 to \$35,000	\$250 / \$375	\$150.00*

**\*Note:** Estimated Rebate Amounts may be adjusted by the School District, if necessary

**F**

**PLEASE READ CAREFULLY, SIGN AND DATE:**

**CLAIMANT:** I declare that this claim is true, correct and complete and to the best of my knowledge and belief that it is the only claim filed by members of my household.

\_\_\_\_\_  
 Claimant's Signature Date

**PREPARER:** I declare that I prepared this return and that it is true, correct and complete to the best of my knowledge and belief.

\_\_\_\_\_  
 Preparer's Signature Date

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_  
 Phone Number EXT: \_\_\_\_\_