763-S Virginia Special Nonresident Claim For Individual Income Tax Withheld 2007



Please Print or Type

Staple Copy of W-2 here

irst Name	MI	Last Name		Suffix	Your Social Se	curity Number	
Present Home Address (Number and Stre	et. Including Apartm	ent Number, or Rural Route)			Spouse's Socia	al Security Number	
Present Home Address (Number and Street, Including Apartment Number, or Rural Route)					Spouse's Social Security Number		
City, Town or Post Office					State	ZIP Code	
Use T	his Form O	nly if You Qualify fo	or One of the 3 (Categories in	_ ⊢Part I Bel	ow	
PART I (Check One)			th Part I and Par				
A. I declare that during	ng the taxah	le vear shown above	۵·				
	•	gal resident of Virgir					
2. I did not live in '	-	-	,,				
	•	s from my place of re	esidence in (Che	ck One):			
	of Columbia			,			
to my place of e	employment	in Virginia; and					
		sources within Virgin e (district) checked a		es and salarie	es which we	ere subject to	
B. I declare that during							
	•	resident of (Check (
		ennsylvania 🗀 \					
		of Virginia (an actua han 183 days of the			or her place	e of abode in	
•		sources within Virgin	• ,		s which we	ere subject to	
income taxation	by (Check	One):					
	ind \square Pe	•	Nest Virginia				
	•	•					
1. I was not a dom	niciliary or le	gal resident of Virgin	nia at any time;				
2. I was a residen	t of (state) $_$						
I did not perforr	n any servic	es in Virginia; and					
4. The Virginia tax	was errone	ously withheld from	salary and wage:	s paid me by	my employ	er.	
PART II							
I request that the Virgin							
wage and tax statemen	t(s), Form W	/-2, be refunded to n	ne. Refund amou	unt requested	: \$		
	File this cl	aim by May 1, 2008	, with the Depart	ment of Taxa	ation,		
	•	nd, Virginia 23218-	•	•			
You Mus		Complete Copy of ` a Resident of a St				eturn	
I, the undersigned, do d	eclare unde	r penalties provided	by law that this is	s a true, corre	ect and com	plete return.	
Please Your Signature			Date	Your Business	Phone Number	Home Phone Number	
Sign Here X				()		()	
Preparer's Sign	ature		Date	Preparer's Pho	one Number		
Use Only X	r Yours if Self-emplo	yed) and Address		Preparer's FEI	N/PTIN/SSN	Code	
(-		•		,	-		
						_	

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