

Form 1A - for the \$200.00 credit

Oklahoma Volunteer Firefighter Tax Credit

supporting documentation

2009

STATE LAW requires **all** first-time participants to do the \$200 tax credit for their first year.
First year? If so, you should list eligible firefighter training taken in 2009, as well as those taken in previous years, below.
 If you have completed a **\$200-1A** tax credit, you may be eligible for the **\$400-1B** or **\$400-1C** tax credit, which have different requirements.

Recognizing the importance of volunteer firefighters and the challenges they face, Title 68 O.S. Section 2358.7 provides the opportunity to receive a tax credit for firefighter training.

Birth Date ►

M	M	D	D	Y	Y	Y	Y
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Your Information:

Print first name and middle initial _____ last name _____

Mailing address (include apartment number or rural route) _____

City, State and Zip _____

Daytime phone, with area code _____ Evening phone, with area code _____
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Your eMail address: _____

For **more information**, see instructions available at www.COFT-Oklahoma.org or call us at (405) 601-8862.

Please enter \$200 on the applicable line for Firefighter Training Tax Credit on the 2009 Form 511CR on your Oklahoma state tax return. Then, transfer the totals of your tax credits to the applicable line for Other Credits on the 2009 Form 511.

Under penalties of perjury, I declare the information presented here is true and correct, to the best of my knowledge.

In accordance with the Privacy Act, I hereby give my permission for my information showing eligibility to be sent to OSU-Fire Service Training and COFT.

_____ Date **Signature of Volunteer Firefighter**

Departmental Affiliation (s):

Currently serving as a volunteer firefighter with: _____

County: _____

Organizational address, including city and zip code: _____

Fire Chief cell phone number _____ Fire Chief daytime phone number _____
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Fire Chief or Fire department's eMail address: _____

List any other Fire Departments under which your training records may be listed.
 Department name(s) _____

- I am working towards my Volunteer Firefighter Practices or Higher Equivalent.
 - I have completed Volunteer Firefighter Practices or Higher Equivalent.
Please attach certificates.

Training:

If you have finished the necessary training, then please submit this form now.
 For your first year, you will need **12 hours** of eligible training. You can list training taken during **Tax Year 2009** and in previous years. If you have been previously approved you only need 6 hours of eligible training—**done in 2009. List of hour equivalencies appears on back of this form and on our website.**

Please attach copies of any relevant training certificates you have.

If your training is listed on an **Attachment S**, please check box.

_____ hours Course Title: _____
 Training Provider: _____
 Year: _____

_____ hours Course Title: _____
 Training Provider: _____
 Year: _____

_____ hours Course Title: _____
 Training Provider: _____
 Year: _____

After completing and signing, please have your Fire Chief sign below. The volunteer firefighter whose name is shown above is a member in good standing of our department.

_____ Date _____ Signature of Fire Chief

 Name of the Fire Chief, printed

Total You may attach extra sheets, if more space is needed. Be sure your name appears on extra pages.

Check one of the following two boxes:

This is my first year to use the \$200 training tax credit.
 I have previously been approved and used the \$200 training tax credit.

Make a copy for your files and department files, then mail original to:
COFT (Council on Firefighter Training)
 2716 NE 50th Street
 Oklahoma City, OK 73111

OSU- Fire Service Training verifies that the eligible training shown above was completed by the applicant.

We recommend you enclose the original of this approved document to the Oklahoma State Tax Commission:
OK Tax Commission
 PO Box 26800
 Oklahoma City, OK 73126-0800
 (405) 521-3160

_____ Date _____ Authorized signature for OSU-FST

COFT certifies that this volunteer firefighter is eligible for a training tax incentive in the amount of \$200 for tax year 2009.

_____ Date _____ Authorized signature for COFT
 Social Security #

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AFTER receiving your approved credit from COFT, please enter your Social Security Number before mailing to the Oklahoma Tax Commission.

Print Or Type

Please make a copy of approved form for your records

For Volunteer Firefighter use only.