



Taxpayer's Full Name: _____ **Spouse's Full Name:** _____

Form ID: NE	Nebraska General Information
-------------	-------------------------------------

County of residence _____ [1]

Public school district _____ [2]

Contributions

Amount of charitable contributions you wish to make to:

Wildlife Conservation Fund _____ [3]

Part-year Resident Information

If you were a part-year resident during the tax year, enter the dates you lived in Nebraska

Part-year residency dates:

From _____ [4]

To _____ [5]

NOTES/QUESTIONS: