

# Wisconsin Tax Information Referral Form

INFORMATION ON INDIVIDUAL				INFORMATION ON BUSINESS		
Person's name				Business name		
Street address				Street address		
City	State	Zip		City	State	Zip
Social security number		Date of birth		Employer identification number		
Occupation				What kind of business? (e.g., grocery store)		
Marital status <i>(check one)</i> <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Head of household <input type="checkbox"/> Divorced <input type="checkbox"/> Separated						
Name of spouse, if applicable						

1. Type of tax violation *(check all that apply)*

- Income tax or withholding tax   
  Sales and use tax   
  Corporation franchise/income tax   
  Other

2a. Amount of unreported income and tax years *(fill in tax years and dollar amounts, if known; e.g., TY 2006, \$20,000)*

TAX YEAR	AMOUNT	TAX YEAR	AMOUNT	TAX YEAR	AMOUNT	TAX YEAR	AMOUNT
	\$		\$		\$		\$

2b. Other type of tax violation, for example overstated expense, wrongly claimed dependent, ineligibility for certain credits, etc. Describe in comments below.

Comments. Briefly describe who, what, where, when and how. *(Attach 2nd page if more space is needed.)*

3. Are books / records available?       Yes       No

4. Do you consider the taxpayer dangerous?     Yes     No    If yes, why?

5. Banks, financial institutions used by taxpayer:

Name			Name		
Address			Address		
City	State	Zip	City	State	Zip

6. Please describe how you learned and/or obtained the information in this report *(attach 2nd page if more space is needed):*

7. If we have additional questions, can we contact you?     Yes     No

8. Do you want to remain anonymous?       Yes       No

Your name	<b>Mail this form to:</b> Wisconsin Department of Revenue Audit Bureau, Unit E, MS 5-144 PO Box 8906 Madison WI 53708-8906  <b>Fax:</b> 608-267-0834  <b>Questions about this form:</b> Call 608-266-2772
Address	
City      State      Zip	
Telephone number <i>(include area code)</i>	

2. Comments. Briefly describe who, what, where, when and how.

[Empty box for comments]

6. Please describe how you learned and/or obtained the information in this report:

[Empty box for source of information]