

# Holder Request for 60 Day Extension of Due Date for Holder Report

## Section 1 – Holder Information

Holder name			FEIN
Street Address			Reporting Month & Year
City	State	Zip	Contact Phone Number (     )
Contact Person			Contact Fax Number (     )
Estimated / Actual Dollars to be Reported / Remitted			Estimated / Actual Shares to be Reported / Remitted

## Section 2 – Request for Information

<b>Reason for Extension</b> <i>(see instructions below)</i>	
Print Name	Title
Signature	Date

## Instructions

Required information:

- Under Reason for Extension, provide a detailed explanation of why you are requesting the extension.
- Submit this form by October 2.

Mail to: Wisconsin Department of Revenue  
PO Box 8982  
Madison WI 53708-8982

Fax to: (608) 261-6799

Email to: [DORWIHolderReports@wisconsin.gov](mailto:DORWIHolderReports@wisconsin.gov)

**Contact information:**  
(608) 264-4594  
Website: [wismissingmoney.com](http://wismissingmoney.com)