

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	Mail this form to: Wisconsin Department of Revenue Audit Bureau, MS 5-77 PO Box 8906 Madison WI 53708-8906 Fax: 608-221-6637 Questions about this form: Call 608-266-2772
Address	
City State Zip	
Telephone number <i>(include area code)</i>	
Email Address	

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]