

Comptroller of Maryland
 Revenue Administration Division
Request for Copy of Tax Form

1. PRINT Name & address of taxpayer(s) as shown on tax form for the requested year(s)	2. Tax Year(s) requested		
	3. Taxpayer's Social Security number as shown on tax form		
	5. Spouse's Social Security number as shown on tax form		
	6. If you are requesting certified copies please check here <input type="checkbox"/>		
	8. Release copies to		
4. PRINT current address if different from above	7. Mail copies to		
9. Requester's telephone number	10. WRITTEN Signature of taxpayer	11. WRITTEN Signature of spouse	Date

OFFICE USE ONLY

Tax Year(s)	Taxpayer's Signature(s) verified by:
Account No.(s)	Photocopied by: Reviewed by:
Researcher's Initials	Date copies released
Date	