

Substitute Forms Program Check Sheet

Request type <input type="checkbox"/> Original <input type="checkbox"/> Resubmission	Date submitted	Date returned
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Name _____

Company	IRS source code
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Telephone number	FAX number	Email address
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The following forms are submitted for approval as a substitute form to be used in lieu of the official IRS form. List each form separately below.

	Form	Approved	Approved with changes	Not Approved - Resubmit	Comments
1.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Reviewer Information

Name	Title
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Signature <i>Candice L. Haynes</i>	Date
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Contact Information

For additional information please contact the Substitute Forms Program at substituteforms@irs.gov.