Form **3911** (Rev. January 1997)

Department of the Treasury - Internal Revenue Service

OMB NO. 1545-1384

Taxpayer Statement Regarding Refund

The box check	ed below is in rep	ly to your inquiry on		about your Federal tax return for 19				
We sent vou a	refund for \$	on	☐ Check	☐ Direct	Deposit			
		your check because they cou	ld not deliver it.		•			
Your check v	vas not cashed within	one year of the issue date a	s the law require	s and it can no	o longer be cashed			
		-			nd it back to us in the enclose	:d		
	•	check within six weeks of the			de de como de la Conferencia			
		neck, or if you received it and e enclosed envelope.	i it was iost, stole	en or destroye	d, please complete Sections l	, ii and		
		eeks from the date you send t at the service center where yo			ntact us at			
, ,	· · ·				is your social security number			
Section I	businesses, it is you	ur employer identification num	nber) and addres	s, including Z	IP code. If you filed a joint ret			
1. Your name	show the names of	both husband and wife on lin	V.	Taxpayer Identification	Numbor			
1. Tour name					Taxpayer identification	Number		
2. Spouse's name	e (if a name is entered i	here, spouse must sign on line 1	4).		Taxpayer Identification I	Number		
3. Street			Apt. No.	City	State	Zip code		
			Area anda	N I comple ex				
	us a phone number w .m. and 4 p.m. Include	here you can be reached e area code.	Area code	Numbe				
If any of the a	above has changed s	since you filed your tax return,	, please enter the	e information b	pelow exactly as shown on yo	ur		
4. Name(s)					Taxpayer Identification Nu	umber(s)		
(- /						()		
Street			Apt. No.	City	State	Zip code		
		ey authorizing a representativ	e to receive you	r refund check	κ, please enter his or her nam	e and		
mailing addre			IC Address (i	naluda ZID aa	da)			
5. Name of repres	sentative		o. Address (I	nclude ZIP co	ue)			
7 Type of return	: Individual	Business, Form		er	Tax period:			
7 Type of return Type of refund		Check Direct Depo			Date filed			
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				-	-			
Section II			Refund Info leck all boxes		o vou.)			
8 I didn't re	eceive a refund.	I received a refund che						
· I raidiffic	socive a relatio.		on, but it was is	ot, oto:011 or ut				
9. I receive	d the refund check ar	nd signed it.						
	law doesn't allow us t rson didn't forge your		if you endorsed	it and someor	ne other than you cashed the	check,		
10. I have re	eceived corresponder	ice about the tax return. (Plea	ase attach a copy	y if possible.)				
(Please giv	e us the following	information if possible.))					
<u> </u>	_	umber where you normally ca		ur checks:				
Bank:		<i>F</i>	Account number:					
12. a. If the refur	nd was a direct depos	sit, did you receive a "Refund	Anticipation Loa	n"? 🗌 YES	S NO			
b. Enter the f	Routing Transit Numb	oer (RTN)	and accou	unt number	show	n on your return.		
					Form 20	111 (Day 1 07)		

Section III	Certification									
	ow, exactly as you sig before we can trace it		n. If this refund was from a joint return, we need	d the signatures	of both					
			nined this form, and to the best of my knowledge a replacement refund, and if I receive two refund							
13. Signature (For business returns, signature of person authorized to sign the check)										
14. Spouse's signature, if required (For businesses, enter the title of the person who signed above.)					Date:					
Section IV			Description of Check							
			(For Internal Revenue Service use only))						
Schedule number	Refund Date	Amount	Other (DLN, Check/Symbol, etc)							

Paperwork Reduction Act Notice-We ask for the information on this form to carry out the Internal Revenue laws of the United States. You aren't required to give us the information since the refund you claimed has already been issued. However, without the information we won't be able to trace your refund, and may be unable to replace it. You may give us the information we need in a letter.

The time needed to complete this form will vary depending on individual circumstances. The estimated average time is less than 5 minutes.

If you have comments concerning the accuracy of this time estimate or suggestions for making this form more simple, we would be happy to hear from you. You can write to the **Internal Revenue Service**, Attention: Tax Forms Committee, Western Area Distribution Center, Rancho Cordova, CA 95743-0001.

DO NOT send this form to this office. Instead, use the envelope provided, or mail it to the Internal Revenue Service center where you filed your tax return.

• U.S. Government Printing Office: 1997 - 514-016/54327 Form **3911** (Rev.1-97)