

Volunteer Assistance Summary Report

Form **13206**
(Rev. 9-2004)

Please mail, fax, or e-mail this form, the preferred reporting method for volunteer assistance or a document containing all information requested on this form to your IRS reporting office by the 3rd business day after the end of the month. See IRS contact for mail or e-mail address.

Date: _____

Site Identification Number: S - -

Note: For filing season 2005 the SIDN (Site Identification Number) will change from beginning with a "P" to beginning with an "S". The remaining digits of current SIDNs will not change. Beginning 2004, sites were issued new SIDNs. If your site does not have a number contact the IRS, SPEC Territory Office.

SPEC Use Only

Direct Site

Leveraged Site
Partner's Name _____

E-file Site Paper Site Both

Site Name: _____

Site Address: _____

Special Services Offered: _____
(i.e. hearing impaired interpreter;
Language Assistance - German)

Site Coordinator/Manager's Name: _____

Site Coordinator/Manager's Mailing and Email Address: _____

Street Address _____

City _____ State _____ Zip Code _____

E-Mail Address _____

Site Coordinator/Manager's Phone Number: () _____

Reminders:

- Total Number of Volunteers Previously Counted _____
- Total Number of New Volunteers _____
(*Enter the total number of volunteers that worked for the first time at a VITA/TCE site)
- Total Number of New Volunteers Reported This Filing Season (Add 1 & 2) _____
- For "Date Certified" an entry should be made for all volunteers who prepare tax returns. This includes tax professionals and other volunteers who were previously exempt from taking a test.

VOLUNTEER LIST

The name and volunteer role (position) should only be entered on this form the first time they report to your site. Future completion of this form is only necessary if new volunteers have reported to your site.

Volunteer Name and Volunteer Role	Date Certified	Check if volunteer worked at more than one site*		If Yes, Indicate Site Name(s)	If Yes, Indicate Program	
		Yes	No		VITA	TCE
Volunteer Name _____ Volunteer Role _____						
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****Territory Offices, before including the volunteer in your count, please make sure they have not been previously counted at another site for the filing season.**

**IRS Volunteer Income Tax Preparation and Outreach Programs
Privacy Act Notice**

The Privacy Act of 1974 requires that when we ask for information we tell you our legal right to ask for the information, why we are asking for it, and how it will be used. We must also tell you what could happen if we do not receive it, and whether your response is voluntary, required to obtain a benefit, or mandatory. Our legal right to ask for information is 5 U.S.C. 301. We are asking for this information to assist us in contacting you relative to your interest and/or participation in the IRS volunteer income tax preparation and outreach programs. The information you provide may be furnished to others who coordinate activities and staffing at volunteer return preparation sites or outreach activities. The information may also be used to establish effective controls, send correspondence and recognize volunteers. Your response is voluntary. However, if you do not provide the requested information, the IRS may not be able to use your assistance in these programs.