

State Individual Income Tax Electronic Filing Authorization

Do not mail this form to the state revenue agency. Keep this form for your records.

Taxpayer Information			
Taxpayer's First Name and Initial:	<input type="text"/>	Last Name:	<input type="text"/>
Social Security Number:	<input type="text"/>	Tax Year:	<input type="text"/>
Spouse's First Name and Initial (if joint return):	<input type="text"/>	Spouse's Last Name:	<input type="text"/>
Spouse's Social Security Number:	<input type="text"/>	State:	<input type="text"/>
Physical Address:	<input type="text"/>		

Part I: Tax Return Information	
1. State Adjusted Gross Income (or equivalent):	<input type="text"/>
2. Total State Tax:	<input type="text"/>
3. State Income Tax Withheld:	<input type="text"/>
4. Refund Amount:	<input type="text"/>
5. Amount Owed (Tax Due):	<input type="text"/>

Part II: Declaration of Taxpayer	
I authorize the Electronic Return Originator (ERO) to enter my PIN as my signature on my state electronically filed income tax return.	
Taxpayer's Personal Identification Number (PIN):	<input type="text"/>
Spouse's Personal Identification Number (PIN) (if joint return):	<input type="text"/>

Part III: Electronic Return Originator (ERO) and Preparer Declaration			
ERO Firm Name:	<input type="text"/>	ERO PTIN/EIN:	<input type="text"/>
ERO Representative Name:	<input type="text"/>	Date:	<input type="text"/>