DOCUMENT REQUEST FORM

**REQUESTS MUST BE MADE IN-PERSON WITH VALID MASON OR GOVERNMENT ISSUED ID**

**IF THE REQUEST CANNOT BE MADE IN-PERSON, ORIGINAL NOTARIZED REQUESTS CAN BE ACCEPTED VIA MAIL, ALONG WITH A COPY OF VALID MASON OR GOVERNMENT ISSUED ID**

**PLEASE ALLOW A MINIMUM OF 5 BUSINESS DAYS FOR PROCESSING**

STUDENT NAME: _______________________________  G# __________________

DOCUMENT BEING REQUESTED: ________________________________

PURPOSE OF REQUEST: ___________________________________________

________________________

Is the document you are requesting a tax return? YES NO
(check yes or no)

If YES, please complete the bottom of this form.

STUDENT SIGNATURE: ___________________________  DATE: ______________

**********************************************************************************************

TAX RETURN BEING REQUESTED: Student  Parent  Spouse
(check all that apply)

NAME ON TAX RETURN(S):

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CURRENT MAILING ADDRESS: __________________________________________

| Street address |
| City  | State | Zipcode |

PHONE NUMBER: ______________________ EMAIL ADDRESS: ______________________

SIGNATURE OF TAX FILER: ____________________________  DATE: ______________
(if other than the student)

***YOU WILL BE NOTIFIED VIA EMAIL WHEN YOUR DOCUMENTS ARE READY TO BE PICKED UP AT OUR FRONT DESK***