

	FOR CA	LENDAR YE	CAR ENDED	CURRENT DATE _		
1.	Name:					
	Phone: Office					
		Cell		Fax		
	Email					
	Address:					
4.	U.S. taxp	U.S. taxpayer identification number, if any Birth Date				
		Marital Status: \Box Single \Box Married \Box Widow(er) with Dependent Child				
		our occupation				
7.		Details of Dependent Children that lived with you during the year:				
	Name			U.S. Social Security # or	Citizenship	
			Birth	ITIN		
8.	Countrie	Countries of citizenship,,				
	Country of Birth					
	Were either of your parents U.S. citizens?					
9. Have you abandoned a green card, or relinquished U.S. citizenship? □ Yes 10. Do you have a U.S. visa? □ Yes □ No					\Box Yes \Box No	
	If yes, type Visa number, if any					
11				ar to the U.S		
	1	5	6 7			
12	Dates you entered and left the U.S. during the calendar year					
13	. Total Nu	mber of days	present in the	U.S. during: 2021 2020 _	2019	
14	4. Have you ever filed a U.S. income tax return? \Box Yes \Box					
	If yes, lat	test Year	Form #			
15.	Did you receive any income from U.S. sources other than US source wages? \Box Yes \Box Ne					
	If yes, pl	ease describe	, including pay	or and amount		
16	. Which st	ate(s) did yo	u work in durin	ng the year?		
17	Please in	clude a copy	of any U.S. so	urce income slips received during	the year.	