

If the address in this box is wrong, please change it. If no address is shown please enter your correct details

Your reference
Tax reference

Year to: 5 April

How to fill in this form

Please fill in this form with details of your income for the above tax year. The enclosed Notes will help you (but there is not a note for every box on the form). If you need more help with anything on this form, please phone us on the number shown above.

If you are not a UK resident, do not use this form - please contact us.

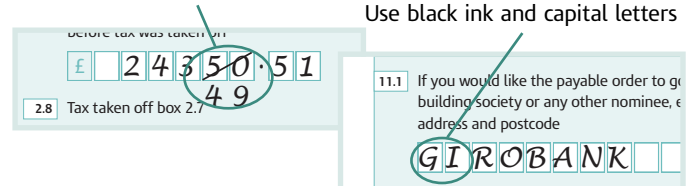
Please do not send us any personal records, or tax certificates or vouchers with your form. We will contact you if we need these.

Please allow four weeks before contacting us about your repayment. We will pay you as quickly as possible.

This form is designed to be read by machine - please follow the completion instructions so that it may be read correctly:

- write inside the boxes, using black ink and capital letters
- if you make a mistake, cross it out and write the correct information below it
- leave blank any boxes or sections that do not apply to you - please do not strike through them.

Cross out any mistakes and write the correct information below



Use black ink and capital letters

Personal details

<p>1.1 Date of birth <i>DD MM YYYY</i></p> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<p>1.4 Your contact phone number(s)</p> <p>Your phone number</p> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
<p>1.2 National Insurance number</p> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<p>Your agent's phone number</p> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
<p>1.3 Name and address - if it is different from above. Please write the correct details underneath the wrong ones, and put 'X' in the box</p> <input type="checkbox"/>	<p>1.5 If this is an interim claim and you expect to receive more income before the end (5 April) of the above tax year, put 'X' in the box</p> <input type="checkbox"/>

Blind Person's Allowance

9.1 If you are registered blind with a local authority, or other register, put 'X' in the box

Please also consider box 10.6 below

9.2 Enter the name of the local authority, or other register (or 'Scotland' or 'Northern Ireland', as appropriate)

Married Couple's Allowance

This allowance is only due if you, or your spouse or civil partner, were born **before 6 April 1935**. Read page 11 of the Notes.

10.1 To claim the full allowance, enter your spouse's or civil partner's full name

10.2 If, as a couple, you have already asked us to give all of the minimum amount to your spouse or civil partner, put 'X' in the box

10.3 If you've already agreed that half of the minimum amount is to go to your spouse or civil partner, put 'X' in the box

10.4 Your spouse's or civil partner's date of birth if older than you and you filled in boxes 10.1, 10.2 or 10.3

DD MM YYYY

10.5 Enter the date of the marriage or civil partnership

DD MM YYYY

10.6 Any unused Married Couple's, or Blind Person's Allowance can be transferred from one spouse or civil partner to the other - if you want us to send you a form to do this, put 'X' in the box or you can download it from www.hmrc.gov.uk/forms/575-t-man.pdf and attach it to this claim form.

Repayment instructions

11.1 If you would like the payable order to go to your bank, building society or any other nominee, please enter in full the name, address and postcode

11.2 If your nominee is your adviser, enter their reference

If the payable order is to be sent to your bank or building society, fill in boxes 11.1, 11.3, 11.4, 11.5 and 11.6, if applicable

11.3 Branch sort code

11.4 Account number

11.5 Name of account holder

11.6 Bank or building society roll or reference number, if you have one

Declaration - Please make sure that you have read the R40 Notes at section 12.2 before signing

12.1 Please sign and date this form and then write your full name (in capital letters) in the space provided

The information I have given on this form is correct and complete to the best of my knowledge.

Signature

Date

Name and title in capital letters

12.2 If you have signed on behalf of someone else, enter the capacity, for example, parent, executor, receiver, attorney

12.3 Tick this box if you do not need a claim form in future