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Extension Request

Important Note: An Extension will extend your time to file. It does not extend your time to pay. If you owe taxes, penalties, and interest it will begin accruing after April 15th on the amount you owe.

You must complete the personal information, amount paid and filing status sections of this form. Incomplete forms cannot be filed. It is your responsibility to set an appointment to have your tax return completed before the extended deadline of October 15th

The deposit filing fee is \$150 which will be applied to your tax filing balance.

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Tax Payer				Spouse		
First name				First name		
Last name				Last name		
Social Security #				Social Security #		
Address						
City				Zip		
Phone:						
Filing Status – Check on box:						
Single	Married Filing	Married Filing	Head of		ualified Widow(er)	
	Joint	Separate	Household	w b	/dep. child	
the IRS through any quarterly e	n withholding a estimated paym	mount or quar	terly estime IRS and	nated pa enter th	yments. It is nece	ou have already paid to essary for you to indicate \$
Email address:						
		via email for ounsion on your b		·	·	eted request has been
CC #			Date	ate of exp		CVV
Signature						