## Transmittal Form for Submission of State and Local Government Tax Exempt Bond Interest Information

Name of Transmitter:				Federal Employer Identification Number (FEIN):			
Contact person's name and title:							
Mailing address – Line 1:							
Mailing address – Line 2 (optional):							
City:		State:			ZIP Code:		
Phone:		Email:					
Indicate if this s	submission is:						
Origin	Original						
Replacement- Includes replacement of physical media damaged in mail, replacement of submissions rejected because files were unreadable; incomplete; presented in wrong file layout or format; or on incompatible media.							
Correction - Submit a complete replacement file for all records, not just replacements for incorrect records.							
List the identity of each financial institution making a submission in this transmittal. Attach additional lists as needed.							
Financial institutions' name: 1)			FEIN		Contact person name and phone:		
2)							
3)							
Encrypted and Password Protected Files:							
Files are not password protected or encrypted. (Only safe if submitted directly to DRS using secure email.)							
Files are password protected. (Do not include the password in the same physical mailing as the data files.) The password and decryption information will be supplied as follows:							
	ransmitter will/has sent password in a separate: [ ] paper mailing or [ ] email (check one).						
	Be sure to include a copy of this transmittal with the password so the data and password can be matched up.  DRS should contact transmitter by:						
	Other – Enter details:						
	ther Enter details	·					
Tax year: Count of each type of physical media submitted: Number of Total number of records							
Tax year:	1	ia submitted:	Number of separate files being submitted:		Total number of records being submitted:		
	CI						
	USB drives (not to be returned)						
	Check here if submitted by secure email						

If physical media is mailed it should be protected from both the risk of data thief and physical damage.

Mail submission on physical media to: Connecticut Department of Revenue Services (DRS)

Income Tax Audit Unit Attention: **Thomas Kaminski** 450 Columbus Blvd. - Suite 1

Hartford CT 06103-1837

For all questions and to arrange a secure email submission contact:

Thomas Kaminski at (860) 541-4569 or by email at: Thomas.Kaminski@po.state.ct.us.