Request for Submission of State and Local Government Tax Exempt Income (TEI) Information Common Replies

Entity Name	e:			
Street 1:				
Street 2:				
City, State,	ZIP			
			o the Connecticut Department of Revenue an AU-409 Transmittal Form by the due date.)	
changes for	r your entity, and any changes for t	he primary contact person for this matte	ct section to report any change of address, name er inside your entity.	
Entity's n	ame and contact person's name ar	nd title:		
Mailing ac	ddress – Line 1:			
Mailing ac	ddress - Line 2 (optional):			
City:		State:	ZIP Code:	
Phone:		Email:		
v	We have TEI data to report and a vendor will be transmitting this data on our behalf. We have directly supplied our vendor with these filing specifications and due date information and have specifically directed them to submit this data on our behalf. The vendor who will be transmitting our data is:			
	Vendor's name:			
C	Contact person's name and title:			
N	Mailing address – Line 1:	ng address – Line 1:		
N	Mailing address – Line 2 (optional):			
C	Dity:	State:	ZIP Code:	
F	Phone:	Email:		
V	We do not have any TEI data to report to the Connecticut Department of Revenue Services:			
	Our entity did not have any customers with a Connecticut mailing address during this tax year.			
	None of our Connecticut customers received any federally tax-exempt income during this tax year.			
	Other – Enter explanation:			

Email this reply to: DRS.DataSubmission@ct.gov