



## 4506T Request Coversheet

Fax: XXX.XXX.XXXX  
 Email: request@rapid4506.com

<b>Date:</b>		<b>Processor Name:</b>	
<b>Company Name:</b>		<b>Email:</b>	
<b>Telephone:</b>		<b>Account #:</b>	

	TAXPAYER'S LAST NAME	SOCIAL SECURITY NO.	YEARS REQUESTED
1.			
2.			
3.			
4.			
5.			
6.			
7.			
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20.			

- All orders received after 5pm CST will be processed next business day
- Please leave line 5 on the 4506T blank
- All 4506T forms must be signed and dated no longer than 60 days prior to today's date
- Address on 4506T forms must match the address on file with the IRS
- Transcripts will be emailed to the above email address