











### Your tax adviser, if you have one

<p><b>15</b> Your tax adviser's name</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	<p><b>17</b> The first line of their address and the postcode</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>
<p><b>16</b> Their phone number</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	<p><b>18</b> The reference your adviser uses for you</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>

### Any other information

**19** Please give any other information in this space

Please see convey letter regarding treatment of overpayment of tax this year. Please credit against tax underpaid for previous year, which is the subject of a direct debit instalment arrangement.

### Signing your form and sending it back

<p><b>20</b> If this Tax Return contains provisional or estimated figures, put 'X' in the box</p> <input type="checkbox"/>	<p><b>21</b> If you are enclosing separate supplementary pages, put 'X' in the box</p> <input type="checkbox"/>
<p><b>22</b> If you give false information, you may have to pay financial penalties and face prosecution. Please sign and date this form.</p> <p>The information I have given on this Tax Return and any supplementary pages is correct and complete to the best of my knowledge and belief</p>	
<p>Date DD MM YYYY</p>	
<p>Signature <i>CP Jarrett</i></p>	<p><input type="text" value="2"/> <input type="text" value="9"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p>
<p><b>23</b> If you have signed on behalf of someone else, enter the capacity. For example, executor, receiver</p> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<p><b>25</b> If you filled in boxes 23 and 24 enter your name</p> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>
<p><b>24</b> Enter the name of the person you have signed for</p> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<p><b>26</b> and your address</p> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>
<p><b>Finally, please send us your completed form in the envelope provided.</b></p>	

