Form **3975**

Department of the Treasury
Internal Revenue Service

Tax Professionals Annual Mailing List Application and Order Blank

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OMB No. 1545–0351

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To expedite delivery, please transmit or mail your order (Form 3975) within ten (10) workdays of receipt of this form.

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Section A

First time participant, skip to Section B.

Current participant, attach peel-off label (from back cover) here or indicate your account number. Make corrections in Section D only.

Account Number ☐☐☐☐☐☐☐

Section B—Daytime Telephone Number

This will help us to get in touch with you if we have questions about your order.

☐☐☐ ☐☐☐ – ☐☐☐☐

Section C—Number of **Tax Professionals** in your firm.

☐☐☐☐☐

Section D—Complete this section if name and address are different from the mailing label, or you are a New Applicant. Please indicate your postal mailing address.

First name

Last name

Firm/Company

Apt. or Suite #

Street address

City or town

State or Province

ZIP code (left justified)

Foreign Country

Foreign Zip Code

Section E—Job Code

Check appropriate category that best describes your principal occupation or business. (Check ONLY ONE.)

1 ☐ Association **3** ☐ Banker **5** ☐ Accountant **7** ☐ Preparer of tax returns **9** ☐ Other

2 ☐ Attorney **4** ☐ CPA **6** ☐ Enrolled agent **8** ☐ Electronic filer "only"

Section F— Request for Package X, Volumes 1 and 2

Limit: 1 copy per Tax Professional in firm/company.

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Catalog Number	Package X	Title	Quantity
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