

e-File vero.fi/mytax



CLAIM FOR ADJUSTMENT OF INCOME TAX

This form is for submitting a claim to the Board of Adjustment against income taxes.

Tax Administration P.O. Box 650 00052 VERO

1 About you			
Your name			Personal identity code or Business ID
Ctroot address			Telephone
Street address			Telephone
Postal code	Post office		
Name of agent	or representative (if	necessary, enclose the letter of authorization)	Telephone
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Address			
About the clai	m which adjustment is	claimed	
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he claim is rela	ated to. Please also i	nclude the necessary forms. Check the <i>Instructio</i>	ons to see which supplement form you should use
Travel exper	nses/Commuting	Interest payments on loans	
Costs for the production of income Business operation / agriculture			
_			
Rental incor 	me / loss from rental	op. Forestry operation	
Credit for do	mestic expenses	Income from foreign sources	
Capital gain	s/Capital losses		
Other reaso			
	im your taxation to b	e adjusted?	
Grounds (if yo	ou run out of space	, enclose separate sheets of paper)	
──I demand th	at tay collection he in	terrupted while this claim is processed.	
		or partially rejected, late-payment interest is collect	ed on the remaining tax.)
Date		Signature	

Send the completed form to Finnish Tax Administration, P.O. Box 650, FI-00052 VERO