



Registration form

Tax Refund from UK

RT Tax

USE ENGLISH LETTERS PLEASE!

First (Given) Name: FIRST NAME

Middle Name: MIDDLE NAME

Surname (Last Name): SURNAME

Date of birth: 19 99 / 99_m / 99_d Tel./Mob.: 999 999 999 999

E-mail address: email@email.com

NIN: AB 12 34 56 C

UTR: _____

NIN - National Insurance Number
UTR - Unique Taxpayer Reference

Please list ALL the arrivals and leavings to/from UK, except short vacations:

Arrival date in UK: 20 09_y / 07_m / 10_d Departure date from UK: 20 09_y / 10_m / 01_d

Arrival date in UK: 20 10_y / 08_m / 01_d Departure date from UK: 20 10_y / 12_m / 03_d

Arrival date in UK: 20 _y / _m / _d Departure date from UK: 20 _y / _m / _d

Arrival date in UK: 20 _y / _m / _d Departure date from UK: 20 _y / _m / _d

Are you planning to go to Great Britain in the next three years? Yes ☒ No ☐

If "Yes", please indicate the dates of the visits: _____

Have you ever received a tax overpayment from Great Britain? Yes ☒ No ☐

If "Yes" explain in details: _____

Your address while in the UK: _____

YOUR ADDRESS WHILE

IN THE UK

Your address in your home country: _____

YOUR ADDRESS IN

YOUR HOME COUNTRY

Employment Information

How many employers did you have: 2

You must list ALL THE EMPLOYERS. Failure to do so may cause problems to get your TAX Refund.

1. Company: COMPANY NAME

Address: COMPANY ADDRESS

Tel/Fax: COMPANY TEL./FAX NUMBER

E-mail: COMPANY E-MAIL

Worked from: 2009_y / 07_m / 15_d till 2009_y / 10_m / 01_d

Client notes:

RT Tax notes:

Income:

Taxes paid:

2. Company: COMPANY NAME

Address: COMPANY ADDRESS

Tel/Fax: COMPANY TEL./FAX NUMBER

E-mail: COMPANY E-MAIL

Worked from: 2010_y / 08_m / 12_d till 2010_y / 12_m / 03_d

3. Company: _____

Address: _____

Tel/Fax: _____

E-mail: _____

Worked from: _y / _m / _d till _y / _m / _d

4. Company: _____

Address: _____

Tel/Fax: _____

E-mail: _____

Worked from: _y / _m / _d till _y / _m / _d

Signature: X SIGNATURE

Date: DATE

By signing this form I declare that all the information, supplied by me on this form is correct and complete.



Refund request form

IMPORTANT! In some cases Tax Authorities might send the tax repayment cheque directly to your home address. If this happens you must inform us about that by calling: +370 37 320391 or e-mailing at: info@rttax.com and pay service fees, which are stated on the service agreement.

YOUR POSTAL ADDRESS: NAME, MIDDLE NAME, SURNAME

(PLEASE USE CAPITAL LETTERS) (NAME, MIDDLE NAME, SURNAME)

STREET, HOUSE NUMBER, FLAT/ROOM NR.

(STREET, HOUSE NUMBER, FLAT OR ROOM NUMBER)

REGION, VILLAGE, TOWN OR CITY

(REGION, VILLAGE, TOWN OR CITY)

POST CODE AND COUNTRY

(POST CODE AND COUNTRY)

Your bank information:

IMPORTANT:

- RT TAX WILL CHARGE 12GBP (UK) FOR THE BANK TRANSFER.
- RT TAX IS NOT RESPONSIBLE FOR ANY FEES CHARGED BY THE CLIENT'S BANK.
- Please call or visit your bank before filling in this part. You can also attach a statement from your bank, showing the details of your account for international money transfer in GBP to your bank account.
- There will be an additional bank charge of 50 GBP, if the bank needs to repeat the transfer because of the incorrect or not full information provided.
- The payment will be made in GBP.

BENEFICIARY BANK DETAILS

THE PERSONAL BANK ACCOUNT: THE PERSONAL BANK ACCOUNT

ACCOUNT HOLDER'S FULL NAME: ACCOUNT HOLDER'S FULL NAME

BANK INFO: FULL BANK NAME; BRANCH NAME

(FULL BANK NAME; BRANCH NAME)

BANK SWIFT CODE / ROUTING NO

(BANK SWIFT CODE / ROUTING NO)

BANK ADDRESS: CITY AND COUNTRY

(BANK ADDRESS: CITY AND COUNTRY)

CORRESPONDENT/INTERMEDIARY BANK DETAILS

(Correspondent bank cannot be the same as beneficiary bank)

FULL BANK NAME

(FULL BANK NAME)

BANK SWIFT CODE CORRESPONDENT BANK ACCOUNT NO

(BANK SWIFT CODE)

(CORRESPONDENT BANK ACCOUNT NO)

BANK ADDRESS

(BANK ADDRESS)

By signing this form I declare that all the information supplied by me on this form is correct and complete. I agree with all the terms and conditions pointed out on this form.

Signature: X SIGNATURE

Date: 20 11 / 11 / 11

I, the undersigned,
 date of birth, National Insurance Number, residing at,
 (hereinafter referred to as the "Principal"), hereby grant a power of attorney to the company, A and Z Group, Inc. its officers and / or employees with its registered address at Laisves Al. 67, Kaunas LT-44304, Lithuania, (hereinafter referred to as the "Agent"), to sign, verify and file all the principal's individual repayment claims and other tax returns; pay all taxes; claim, sue for and receive all tax refunds; examine and copy all the principal's tax returns and records; represent the principal before any taxing body and sign and deliver all tax powers of attorney on behalf of the principal that may be necessary for such purposes; waive rights and sign all documents on behalf of the principal as required to settle, pay and determine all tax liabilities; and, in general, exercise all powers with respect to tax matters which the principal could if present and under no disability.

On the basis of this power of attorney A and Z Group, Inc. its officers and/or employees are given the authority:

1. To act as an agent in dealing with the Principal's individual U.K. income tax applications for the tax years 2008-2013.
2. To receive personal tax refund cheques issued in Principal's name or tax refund transfers to it's own account and convey such refunds to the Principal by way of a bank transfer, check or to handle in another manner so as to achieve the same purpose.
3. To request from the employer and to receive Principal's P-45/P-60 to it's own address: A & Z Group Inc. Laisves Al. 67, Kaunas LT-44304, Lithuania.
4. To use own postal address on the Principal's tax returns. To receive all correspondence from the U.K. Tax Authorities.

The undersigned does hereby appoint A and Z Group, Inc officers and / or employees as his/her attorney to receive, endorse, and collect cheques payable to the order of the undersigned. All rights, powers and authority of A and Z Group, Inc its officers and / or employees to exercise the prerogatives granted herein shall commence and be in full force and effect and remain in full force and effect for a period of twenty four months of the date of its signing.

Signed this 25 day of Month, 2013
 Signature of the Principal: **X SIGNATURE**

4. How you want to be paid any money due back to you

Not everyone gets a refund. It is not always possible to issue a payment to a non-UK bank account. If you are due a refund, we can either pay it to you or someone else on your behalf - they are known as a 'nominee'. Please choose one of the following two options:

<input type="checkbox"/> Option one - Pay into a UK bank or building society account Bank sort code <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> Account number <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Account holder's name <input type="text"/> Bank or building society name and address Name <input type="text"/> Address <input type="text"/> <input type="text"/> Postcode <input type="text"/> Put 'X' in one box This is my account <input type="checkbox"/> This is my nominee's account <input type="checkbox"/>	<input checked="" type="checkbox"/> Option two - Pay by cheque direct to me or my nominee Put 'X' in one box Make the cheque payable to me <input type="checkbox"/> I authorise the cheque to be payable to my nominee <input checked="" type="checkbox"/> Name of nominee <input type="text" value="TT EXPRESS, UAB"/> Address to send cheque to <input type="text" value="OZESKIENES 15"/> <input type="text" value="KAUNAS"/> <input type="text" value="REPUBLIC OF LITHUANIA"/> <input type="text" value="LT44254"/>
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Declaration

You must sign this declaration.

If you give information which you know is not correct or complete, action may be taken against you.

I declare that:

- the information I have given on this form is correct and complete to the best of my knowledge.
- I claim repayment of any tax due back to me.

Signature

X SIGNATURE

Date DD MM YYYY

What to do now

Put an 'X' in relevant box

I have enclosed parts 2 and 3 of my form P45 Details of employee leaving work ☐

Do not send photocopies. If you have not yet received your P45 from your employer please get it before you return this form.

I can't get a form P45 ☐

Please tell us why in the box below, for example because you are retired or a UK Crown servant employed abroad. If you have a form P45 and don't send it to us, any repayment due to you cannot be made.

Please send this form to your tax office. You can find your tax office address by:

- going to www.hmrc.gov.uk selecting Contact us and choosing Income Tax
- asking your employer.

We will let you know the outcome of this claim as soon as we can.

Please complete, sign, then send this form to your HM Revenue & Customs office. Use CAPITAL letters

Date received by HM Revenue & Customs

Details of Claimant

Full name
Address
Postcode

Claim

I claim repayment of the amount overpaid by me, (for non SA claims the period or year ended must be entered in the box aside).

/	/
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Claimant's signature **X SIGNATURE**

Date / /

If you complete a Self Assessment Return your repayment will usually be sent direct to you or your nominee's bank or building society account. Please include the branch sort code, the account number and if appropriate, the name and address of the nominee in the authority below. If you or your nominee does not have a bank account, we can arrange for repayment to be made in the form of a payable order but you or your nominee will need to open a bank or building society account in order to cash it. If the repayment is to be sent to your nominee by payable order, the nominee's name and address must be entered in the authority below.

If you do not complete a Self Assessment Return your repayment will be made in the form of a payable order, which must be paid into a bank or building society account. If you do not have a bank or building society account you should nominate someone who does to receive the order for you. If the repayment is to be sent to a nominee or posted direct to your bank or building society by payable order, the name and address must be entered in the authority below. Also include your account number and sort code if the payable order is to be posted direct to your bank or building society.

Authority

I authorise nominee/agent (delete as appropriate)*

Your/your nominee's bank or building society account number (delete as appropriate)

TT EXPRESS, UAB

of (full address)

OZESKIENES 15

KAUNAS

REPUBLIC OF LITHUANIA

Postcode LT44254

Branch Sort Code

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Agent's reference (if applicable)

to receive on my behalf the amount due.

Claimant's signature **X SIGNATURE**

Date / /

*enter the name of the account holder or the person who will receive the payable order.

Please complete, sign, then send this form to your HM Revenue & Customs office. Use CAPITAL letters

Date received by HM Revenue & Customs

Details of Claimant

Full name
Address
Postcode

Claim

I claim repayment of the amount overpaid by me, (for non SA claims the period or year ended must be entered in the box aside).

/	/
---	---

Claimant's signature **X SIGNATURE**

Date / /

If you complete a Self Assessment Return your repayment will usually be sent direct to you or your nominee's bank or building society account. Please include the branch sort code, the account number and if appropriate, the name and address of the nominee in the authority below. If you or your nominee does not have a bank account, we can arrange for repayment to be made in the form of a payable order but you or your nominee will need to open a bank or building society account in order to cash it. If the repayment is to be sent to your nominee by payable order, the nominee's name and address must be entered in the authority below.

If you do not complete a Self Assessment Return your repayment will be made in the form of a payable order, which must be paid into a bank or building society account. If you do not have a bank or building society account you should nominate someone who does to receive the order for you. If the repayment is to be sent to a nominee or posted direct to your bank or building society by payable order, the name and address must be entered in the authority below. Also include your account number and sort code if the payable order is to be posted direct to your bank or building society.

Authority

I authorise nominee/agent (delete as appropriate)*

Your/your nominee's bank or building society account number (delete as appropriate)

TT EXPRESS, UAB

of (full address)

OZESKIENES 15

KAUNAS

REPUBLIC OF LITHUANIA

Postcode LT44254

Branch Sort Code

--

Agent's reference (if applicable)

to receive on my behalf the amount due.

Claimant's signature **X SIGNATURE**

Date / /

*enter the name of the account holder or the person who will receive the payable order.

Authorising your agent

Please read the notes on the back before completing this authority. This authority allows us to exchange and disclose information about you with your agent and to deal with them on matters within the responsibility of HM Revenue & Customs (HMRC), as specified on this form. This overrides any earlier authority given to HMRC. We will hold this authority until you tell us that the details have changed.

I, *(print your name)*

of *(name of your business, company or trust if applicable)*

authorise HMRC to disclose information to

(agent's business name)

Unitrust Finance, Inc

who is acting on my/our behalf. This authorisation is limited to the matters shown on the right-hand side of this form.

Signature see note 1 before signing

X SIGNATURE

Date

Give **your personal** details or Company registered office here

Address
Postcode
Telephone number

Give your agent's details here

Address
OZESKIENES 15
KAUNAS
REPUBLIC OF LITHUANIA
Postcode LT44254
Telephone number +370 37 755211
Agent codes (SA/CT/PAYE)
Client reference

For official use only

SA	<input type="checkbox"/>	/	/	/	COTAX	<input type="checkbox"/>	/	/	/
NIRS	<input type="checkbox"/>	/	/	/	EBS	<input type="checkbox"/>	/	/	/
COP	<input type="checkbox"/>	/	/	/	VAT	<input type="checkbox"/>	/	/	/
NTC	<input type="checkbox"/>	/	/	/	COP link	<input type="checkbox"/>	/	/	/

Please tick the box(es) and provide the reference(s) requested *only* for those matters for which you want HMRC to deal with your agent.

Individual *Partnership *Trust * Tax Affairs ☒

*delete as appropriate (including National Insurance).

Your National Insurance number (*individuals only*)

If you are self employed tick here ☐

Unique Taxpayer Reference (*if applicable*)

If UTR not yet issued tick here ☐

If you are a Self Assessment taxpayer, we will send your Statement of Account to you, but if you would like us to send it to your agent instead, please tick here ☐

[illegible]

Corporation Tax

Company Registration number

Company's Unique Taxpayer Reference

Employer PAYE Scheme ☐

Employer PAYE reference

Accounts Office reference

VAT ☐ (see notes 2 and 5 overleaf)

VAT registration number

If not yet registered tick here ☐

Date: 2018-04-01

This Services Agreement (the "**Agreement**") is executed by and between: Date: **2018-04-01**

(1) Unitrust Finance, Inc (dba RT Tax), company code 70464217, address 1219 Ogden Ave, Suite #C, Downers Grove, IL 60515, USA represented by the person duly authorized under existing legislation (the "**Service Provider**"); and

(2) NAME, SURNAME, date of birth 1999-99-99 (the "Client")

Hereinafter the Service Provider and the Client together are referred to as the "Parties" and each separately as the "Party"

(A) The Service Provider provides tax refund and related services and the Client wishes to recover the personal income tax paid due to work abroad or on other grounds.

(B) The Parties wish to agree on the terms and conditions of tax refund.

1. Subject matter

11. In accordance with the terms and conditions established in this Agreement and the General Terms and Conditions of Services (hereinafter - **T&C**), the Service Provider shall provide to the Client tax refund and related services, i.e. shall draw up the documents necessary for the refund of the taxes paid by the Client in the United Kingdom, Ireland, the Netherlands, Germany, Norway, Austria, Denmark or other jurisdiction and shall present them to the corresponding tax authorities or other competent institutions (the "**Services**"), and the Client shall accept and remunerate for such Services in accordance of the terms and conditions of this Agreement.

1.2. By signing this Agreement the Client authorises the Service Provider to prepare, sign and file tax returns and to receive all correspondence, including tax refund cheques, from tax authorities. Service Provider will as necessary disclose that he is acting as the nominee of the Client and all the actions are made in the name and on behalf of the Client.

1.3. Taxes will be refunded to the Client by a bank transfer of the refunded amount to the bank account, prepaid debit card or by a bank cheque drawn in the name of the Client. If Tax Refund Cheque is received, the Cheque shall be collected and the tax refund amount shall be transferred to the Client by the Services Provider and (or) the third person engaged by the Service Provider for payment collection services in accordance with the T&C.

1.4. The final amount of the taxes to be refunded shall be established by a competent institution of the foreign country. The amounts calculated by the Service Provider are for information purposes only and do not entitle the Client to claim the preliminarily calculated amount.

2. Terms of Provision of Services

- 2.1. The Service Provider hereby undertakes:
 - 2.1.1. to provide the Client information on the documents that the Client needs to submit to the Service Provider for the purposes of filing for the tax refund;
 - 2.1.2. to collect, complete and sign all the required forms, requests and other related documents on behalf of the Client;
 - 2.1.3. to submit the required documents to the respective tax authorities or other competent institutions responsible for tax refunds;
 - 2.1.4. to inform the Client about the process of the tax refund and other related matters at the Client's request;
 - 2.1.5. to organise the collection of the Tax Refund Cheque and (or) to instruct the tax authority to transfer the tax refund amount to the Service Provider and (or) the third person engaged by the Service Provider for payment collection services in accordance with the T&C for subsequent transfer of tax refund amount to the Client (excluded the Service Fee indicated in Clause 3.1 and 3.2), or to instruct the tax authority to transfer the tax refund directly to the Client's prepaid debit card.

2.2. The Client hereby undertakes:

2.2.1. To provide to the Service Provider complete, true and accurate information and documents (originals and copies) required for the completion of the tax refund. The Client is entitled to provide the information either by filling in paper forms provided by Services Provider or by filling in the online information form available at the Service Provider's internet site;

2.2.2. To fill in and sign any forms and other documents required for the completion of the tax refund and perform other obligations established in the T&C, which constitute an inseparable part of this Agreement;

2.2.3. To fill in and sign any forms and other documents required for the issue of the Payee, Inc debit card and to accept the tax refund amount to the "Payee, Inc" debit card (excluded from the Service Fee indicated in Clause 3.1 and 3.2) when so required;

2.2.4. To inform the Service Provider immediately and in all cases not later than within 5 (five) days, if the foreign tax or other authority transfers the refunded amount or a part thereof or sends the Tax Refund Certificate for the full refund amount to a part thereof directly to the Client;

2.2.5. To inform the Service provider immediately in the case during the validity term of this Agreement the Client concludes any agreement regarding the tax refund services in the United States of America with other service providers. In such case the Service provider is entitled unilaterally to terminate this Agreement.

2.2.6. to inform the Service Provider of the new employment or self-employment in a foreign country;

2.2.7. to inform the Service Provider of any changes in the Client's contact details or about any other changes that may have impact to the tax refund. The information can be updated on the internet site of the Service Provider or e-mailed;

2.2.8. to pay the Service Provider the Service Fee as set out in Section 3 hereof

3. The Services Fees

3.1. The fee for the Services (the **"Service Fee"**) for refunding taxes for each tax year shall be:

3.1.1. United Kingdom: the service fee shall be 12% from the refunded amount with a fixed minimum of GBP 60;

3.1.2. The Netherlands: if the tax refund amount is between EUR 0-100, the service fee shall be 35 EUR; for 101 EUR and more, the service fee shall be 14% from the refunded amount with a fixed minimum of 69 EUR;

3.1.3. The Netherlands social security (Zorgtoeslag) refund: if the tax refund amount is between EUR 0-100, the service fee shall be 35 EUR; for 101 EUR and more, the service fee shall be 14% from the refunded amount with a fixed minimum of 69 EUR;

3.1.4. Germany: the service fee shall be 14% from the refunded amount with a fixed minimum of EUR 55;

3.1.5. Austria: the service fee shall be 14% from the refunded amount, with a fixed minimum of EUR 50;

3.1.6. Denmark: the service fee shall be 14% from the refunded amount, with a fixed minimum of 500 DKK; For the service that has been carried out for Denmark holiday allowance refundance (Ferieløst) in Denmark, Service Provider is entitled to commission fee 14% from the refunded amount, with a fixed minimum of 79 EUR;

3.1.7. Norway: the service fee shall be 14% from the refunded amount, with a fixed minimum of NOK 690;

3.1.8. Ireland: the service fee shall be 12% from the refunded amount with a fixed minimum of 60 EUR;

3.1.9. Ireland tax refund (Universal Social Charge (USC)): the service fee shall be 12% from the refunded amount with a fixed minimum of 60 EUR;

3.2.1. For the retrieval of the lost or missing documents should be for P-45/P-40 (United Kingdom) – GBP 20, P-40 (Ireland) – EUR 20, RF-1015B (Norway) – NOK 150, “Jaaropgaaf” form (the Netherlands) – EUR 20, Lohnsteuerbescheinigung (Germany) – EUR 20, Oplysningsseddel form (Denmark) – 150 DKK, Jahreslohnzettel or Lohnzettel (Austria) – EUR 20, Church fee refund (Germany) – EUR 20.

3.2.2. The fee for the receipt of international money transfer or check cashing, money remittance and other bank services shall be 15 EUR if the tax refund service was provided from The Netherlands, Germany, Austria, Ireland or Denmark holiday allowance, 25 GBP if the tax refund service was provided from the United Kingdom, 120 DKK if the tax refund service was provided from Denmark, 130 NOK if the tax refund service was provided from Norway;

3.2.3. If Client provided incorrect or not full bank account information and the bank transfer was rejected and the money were returned there will be an additional charge of 20 EUR to repeat the bank transfer. Service Provider is not responsible for the fees charged by the bank for the money return;

3.2.4. The Client shall also compensate the fees and costs incurred by the Service Provider in the tax refund process that could not be foreseen at the moment of the execution of this

3.3. The amount of the payable VAT (if applicable) shall be added to all amounts indicated in Sections 3.1-3.2 hereof. The fees established in Sections 3.1-3.2 may be changed by the Service Provider unilaterally and shall be applicable to any request of the Client to provide the Services submitted after the Client has received notice on the change of fees.

3.4. Provider unilaterally and shall be applicable to any request of the Client to provide the services submitted after the Client has received notice on the change of fees. The Client shall be charged the new fee from the date of the change of fees. If, by some reasons, the Client receives the tax refund cheque to his home address, he/she must inform about it Service Provider and pay the Service Fee (s) according to this Agreement. If the Client does not pay the Service Fee (s) in 10 (ten) days after receiving the invoice, he/she shall be obligated to pay late charges 0.2 percent per month on the unpaid balance of the invoice.

3.5. If during the process of filing the documents the Service Provider becomes aware that the Client is not entitled to the tax refund (i.e. there is a tax debt), the Service Provider will calculate and provide the Client with the amount of the tax debt and the Service Fee payable to the Service Provider. In such case, the Service Provider continues the filing of documents only after the Client agrees to proceed and pays to the Service Provider the calculated Service Fee.

4. Processing of personal data

4.1. Service provider, acting as a data controller, shall process Client's personal data for the purposes of: (i) proper performance of Service provider's obligations under this Agreement; (ii) necessary communication; (iii) protection of Service provider's rights and interests (in case of a claim or a debt collection); (iv) statistical analysis; Legal basis for processing personal data is respectively, (i) necessity to perform this Agreement and mandatory statutory requirements related to tax refund; (ii) legitimate interest – to provide good customer service; (iii) legitimate interest and (iv) legitimate interest - to improve our business.

4.2. The Client acknowledges that the Service provider is located in the USA, thus personal data shall be transferred from Client's country of residence to USA. For clarity, as the Service provider is located in USA, the data transfers of the Client are necessary for the conclusion and performance of this Agreement. The Service provider guarantees that it has signed

agreements regarding safe and lawful processing of personal data with its EU partners and when necessary shall use legitimate safeguards and derogations where it is allowed by the applicable law.

- 4.3. The Client acknowledges that Service Provider shall engage third parties, data processors, for the purposes of proper performance of this Agreement. The list of currently used data processors can be found at <https://rttax.com/privacy-policy/> Privacy Policy.
- 4.4. Depending on a situation, the Client, as a data subject, shall have all or some of following rights: the right at any time to request the Service provider an access to the processed personal data, request for rectification or erasure of them, request for data portability or restriction of the processing of personal data, a right to object to the processing of personal data, the right to lodge a complaint with a supervisory authority.
- 4.5. The data related to the providing of tax refunding services is necessary. Therefore, if the Client does not submit the personal data specified in the online forms, performance of the Agreement shall become impossible.
- 4.6. The data shall be stored during the term of the agreement and 10 years after the termination of the Agreement (subject to the limitation period).
- 4.7. For a comprehensive information on how Service provider processes personal data, please refer to <https://rttax.com/privacy-policy/> Privacy Policy or can be provided in writing at your request.
5. **Liability**
- 5.1. In the case the Client terminates the Agreement due to any reason other than failure by the Service Provider to perform its obligations after the filing for the tax refund and (or) in the case established in Art. 2.2.4 hereof, the Client shall cover all expenses of the Service Provider incurred due to the provision of Services until termination of the Agreement, but not less than 50 % of the Service Fee under this Agreement.
- 5.2. The Service Provider shall not be liable for: the delays in refunding taxes if the delay is caused by the foreign tax or other competent institutions; the failure to refund taxes, for the tax liability or for any other negative consequences, which occurred due to false, inaccurate or incomplete information provided by the Client or due to Client's prior financial commitments to any foreign tax or other institutions; the negative consequences incurred by the Client due to the changes in the applicable laws, rules, regulations or procedures applicable for the tax refund; additional bank charges, if the bank needs to repeat the transfer because of the incorrect or not full information provided; and any fees charged by the Client's or intermediary bank.
6. **Validity of the Agreement**
- 6.1. The Agreement shall come into force the moment the Service provider receives the Agreement signed by the Client and shall be valid until the proper and full performance of the obligations of the Parties set in the Agreement. The Agreement may be terminated by the mutual agreement of the Parties, except in the cases established by law.
7. **Miscellaneous**
- 7.1. The T&C (<https://rttax.com/terms-and-conditions/>) constitutes an integral part of this Agreement. By signing this Agreement, the Client confirms and guarantees to the Service provider, that the Client has carefully read these terms and conditions before accepting them and signing this Agreement.
- 7.2. This Agreement, all information, documents and correspondence related thereof shall be considered as strictly confidential, and shall not be disclosed to any third persons, except (i) as required by the applicable laws; (ii) the information became publicly available through no fault of or failure to act by the Party; and (iii) the disclosure of respective information is reasonably necessary for the fulfillment of the Party's obligations.
- 7.3. Service Provider has the right to assign its rights and obligations provided for in the Agreement to any third persons without a prior written consent of the other Party.
- 7.4. All additions, amendments and annexes to the Agreement shall be valid if they are executed in writing and signed by both Parties without prejudice to Sections 3.1-3.3 hereof. This Agreement will be governed by and construed under the laws of the State of Illinois, United States of America. The disputes arising between the Parties regarding this Agreement or during the performance of this Agreement are settled by way of negotiations. In case of failure to come to an agreement, the disputes shall be finally settled by the competent courts of the State of Illinois, United States of America. All notices and other communication under this Agreement shall be in writing and shall be handed in person or sent by regular mail, e-mail or fax.

Client X **SIGNATURE** (signature)

UK DOCUMENTS (SAMPLES)

P-45

P45 Part 1A
Details of employee leaving work
Copy for employee

1. Employer PAYE reference
Office number / Subcontractor
2. The date a leaving date
3. The date a leaving date
4. Leaving date: 01/01/2010
5. The employee's name and address
6. The employee's date of birth
7. The employee's date of birth
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10. The employee's date of birth
11. The employee's date of birth
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P60
End of year certificate
2009-10

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LAST PAYSPLIT

LAST PAYSPLIT

Employee No.	Employee Name	TOTAL INCOME (ENTER YEAR TO DATE (YTD) AMOUNT)	DATE	Table A
123	Mr. J. Smith	1135.45	31/03/2010	Table A
Hours	180.00	£ 8.00	£ 1440.00	119.50
Holiday Pay	1.00	£ 200.00	£ 200.00	72.49
Total Gross		1135.45		
Total Deductions		347.38		
Net Pay		788.07		

CIS VOUCHER

CIS VOUCHER

Monthly Summary Report:

Month ending	Gross Payment	Tax Deducted	Net Payment
05/05/2009	4,700.00	940.00	3,760.00
Total:	4,700.00	940.00	3,760.00

SubContractor

SubContractor Monthly Statement

Contractor's Employer's Reference Number: [REDACTED]

Construction Industry Scheme
Statement of payment and deduction for month ending: [REDACTED]

Subcontractor

Name: [REDACTED]
Unique Tax Payer Reference: [REDACTED]
NIC: [REDACTED]
Higher Rate Verification Number: [REDACTED]

Gross amount paid (Excl VAT and OTH levy): (A)	1,668.00
Less cost of materials:	0.00
Amount liable to deduction:	1,668.00
CIS Tax Deducted: (B)	333.60
Amount Payable: (A-B)	1,334.40

*Verification number only to be entered where a deduction at the higher rate has been made.

National Insurance
Numbercard

NATIONAL INSURANCE NUMBERCARD

A TEESSIDE STUDENT

THIS IS NOT PROOF OF IDENTITY