

## Note: For Paper Checks Only

Tax year	Maryland refund check dated	Amount		
Primary Taxpayer's printed name		Primary Taxpayer's Identification Number		
Primary Taxpayer's signature*				
Secondary Taxpayer's printed name		Secondary Taxpayer's Identification Number		
Secondary Taxpayer's signature*				
Current Mailing Address - Street/PO B	DX			
Current Mailing Address - City		State	Zip Code + 4	
Davtime Contact Number				

\*Signatures are matched to our master files. On jointly filed returns, both taxpayers must sign this request Business filers filing this form must include the signature of a corporate officer or the tax preparer. Electronic filers should attach a copy of state issued identification for verification.

## Please place a stop payment on the above referenced refund check and issue a replacement check at the provided mailing address.

Submit Forms to the Refund Unit via Email, Fax or Mail:

Email: RADREFUND@marylandtaxes.gov

**Fax:** 410-260-7890

Mail: Comptroller of Maryland Revenue Administration Division Attn: Refund Unit PO Box 1829 Annapolis, Maryland 21404-1829 Form 106 allows a business or individual to request a stop payment on a refund check issued by the Comptroller of Maryland.

## SPECIFIC INSTRUCTIONS

- Use a separate Form 106 for each type of payment.
- Enter the tax year for which the refund check was issued.
- Enter the date the refund check was issued as written on the check.
- Enter the exact amount of the refund check.
- Individuals: Enter first name and last name of the primary taxpayer as it appears on the refund check.
- Businesses: Enter the name of the business as it appears on the refund check.
- Individuals: Enter the primary taxpayer's Social Security number (SSN)/ Individual Taxpayer Identification Number (ITIN).
- Businesses: Enter your federal Employer Identification Number (FEIN).
- Individuals: Enter the signature of the primary taxpayer.
- Businesses: Enter the signature of the duly authorized corporate officer.
- Individuals: Enter the secondary taxpayer's printed name as it appears on the refund check if applicable.
- Enter the secondary taxpayer's SSN/ITIN if applicable.
- Enter current mailing address.
  - For a foreign address:
  - » Enter street number and street name or PO Box on "Current Mailing Address - Line 1" line.
  - » Enter city or town; province, state, or county; and postal code on "Current Mailing Address Line 2" line.
  - » Enter the name of the country on the "City or Town" line.
  - » Leave the "State" line and "ZIP Code" line blank.
- Enter the current daytime contact number.