



Illinois Department of Revenue

Submission ID

IL-8453

Illinois 2012 Individual Income Tax Electronic Filing Declaration

(Do not mail Form IL-8453 to the Illinois Department of Revenue unless it is requested for review.)

Step 1: Provide taxpayer information

Print or type

Brandon H	Marcela Arroyo Sislow Sislow	361-72-3270
First name and middle initial	Spouse's first name (and last name if different) Last name	Social Security number
4525 W. Roundstone Way		325-80-6288
Mailing address		Spouse's Social Security number
Waukegan	IL 60085	
City	State ZIP	Daytime phone number

Step 2: Complete information from tax return

1	Net income from Form IL-1040, Line 11, or Schedule NR, Step 5, Line 51	1	88,907.00
2	Tax from Form IL-1040, Line 13	2	4,445.00
3	Illinois Income Tax withheld from Form IL-1040, Line 25 only (enter '0' if none)	3	4,900.00
4	Overpayment from Form IL-1040, Line 35	4	427.00
5	Total amount due from Form IL-1040, Line 39	5	00
6	Filing status: <input type="checkbox"/> Single/head of household <input checked="" type="checkbox"/> Married filing jointly <input type="checkbox"/> Married filing separately <input type="checkbox"/> Widowed		

Step 3: Complete direct deposit of refund or electronic funds withdrawal information (Optional)

To initiate a payment or refund transaction, the information in this Step must be included within the electronic transmission. Illinois does not support international ACH transactions. IDOR will only perform direct transactions (i.e., debit, deposit) with financial institutions located within the United States or those not funded by international funds. Electronic payments will not be accepted and refunds will be via paper check.

7 Routing number (RN): 081904808
8 Account number (AN): 291009641486
9 Type of account: ☒ Checking ☐ Savings
10 Date the payment is to be electronically withdrawn: _____
11 Electronic funds withdrawal amount: 00
12 Name on account: _____

Step 4: Taxpayer declaration and signature (Sign only after Step 2 and Step 3 (if applicable) is completed.)

- ☒ I consent that my refund may be directly deposited as designated in Step 3 and declare the information on lines 7 through 9 is correct. If I have filed a joint return, this is an irrevocable appointment of the other spouse as an agent to receive the refund.
- ☐ I authorize the Illinois Department of Revenue (IDOR) and its designated financial agent to initiate an ACH electronic funds withdrawal as designated in the electronic portion of my 2012 Illinois income tax return. I authorize the financial institutions involved in the processing of an electronic overpayment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment.
- ☐ I do not want direct deposit of my refund, or an electronic funds withdrawal (direct debit) of my balance due.

Under penalties of perjury, I declare the information on my electronic IL-1040 return and the information I provided to my electronic return originator (ERO) are identical. To the best of my knowledge, my return is true, correct, and complete. I consent that my return, this declaration, and accompanying information may be sent to IDOR by my ERO. I authorize IDOR to inform my ERO and/or the transmitter when my return has been accepted or rejected. If rejected, I authorize IDOR to identify the reason(s) so the return may be corrected and retransmitted if possible.

Sign here Brandon H 4/12/13 Marcela A Sislow 4/12/13
Your signature Date Spouse's signature (if joint return, both must sign) Date

Step 5: Electronic return originator (ERO) and paid preparer declaration and signature

I declare that I have examined this taxpayer's electronic IL-1040 return, the information on this Form IL-8453, and accompanying information. I have followed all requirements of this program and declare, under penalties of perjury, that to the best of my knowledge the taxpayer's return and accompanying information are true, correct, and complete.

ERO's signature [Signature] 4/12/13 Date
Check if paid preparer: ☒ (See instructions.)

ERO use only
Firm's name or your name if self-employed THE ACCOUNTANTS GROUP
Mailing address
City State ZIP
P00059334
Your Social Security number (SSN) or PTIN
36-3851819
Federal employer identification no. (FEIN)
Phone number

Step 6: Attach required documents (e.g., Forms W-2, W-2G, 1099-G, 1099-R, IL-1310).