

Salut,

Îți mulțumim că ai ales RT Tax să îți recupereze taxele din SUA!
Returnarea taxelor nu a fost niciodată mai ușoară! **Urmărește acești pași:**

LISTEAZĂ toate paginile acestui fișier

SEMNEAZĂ la semnul "X"

FĂ O POZĂ sau **SCANEAZĂ** documentele de mai jos:

Formular de înregistrare
Imputernicirea avocatului
PA 2848
Contract

Le vei găsi în acest pachet

- Formularul/formularele **W-2** sau ultimul **pay slip/urile** (de la fiecare angajator)
- Copie după card-ul tau "**Social Security**"
- Copie după viza ta **SUA** din pasaport
- Formularul **DS-2019** (doar pentru deținători de viză J-1)

NOTĂ: Chiar dacă nu ai toate documentele necesare, poți să începi procesul de recuperare taxe. Vom obține documentele lipsă pentru tine!

DEPUNE TOATE DOCUMENTELE LA RT TAX!

- Încarcă **ONLINE** pe www.rttax.com (am trimis numele de utilizator și parola pe adresa ta de e-mail)
- Sau trimite e-mail pe usa@rttax.com
- Sau adu sau trimite la biroul de reprezentanță RT Tax din țara ta

American Work and Travel

Cluj-Napoca
Str.Napoca nr.5/22,
Tel.: +40744134820
E-mail: info@workandtravel.ro
www.workandtravel.ro

RELAXEAZĂ – TE! TU ȚI-AI FĂCUT TREABA! DE RESTUL NE OCUPĂM NOI!

Îți: trimitem un e-mail cu suma returnabilă calculată etimativ (Dacă nu primești acest e-mail, te rugăm să ne contactezi pe info@rttax.com sau online pe www.rttax.com).

Îți: vom procesa documentele și le vom trimite Autoritățile Fiscale Americane.

Îți: vom transfera banii în contul tău la bancă sau îți vom trimite un cec personal.

PERIOADA de Rambursare Taxe:

Procedura de returnare în SUA începe la sfârșitul anului financiar, în 1 ianuarie.

GENERAL: Perioada de rambursare ține de obicei de la **90** până la **120** de zile de la momentul în care primim documentele.

RAPID: Perioada de rambursare ține de obicei de la **35** până la **45** de zile. Ca să aplici pentru recuperare rapidă bifează pe formularul de înregistrare!

DE URGENȚĂ: Perioada de rambursare ține de obicei de la **5** până la **7** de zile. Ca să aplici pentru recuperare de urgență bifează pe formularul de înregistrare!

NOTĂ: Documentele încărcate online sau trimise prin e-mail sunt procesate mai repede!

TAXA Serviciilor:

Recuperare de taxe Federale și Statale Standard:

50 USD, dacă suma returnabilă e 0-200 USD
70 USD, dacă suma returnabilă e 201-600 USD
80 USD, dacă suma returnabilă e 601-800 USD
10%, dacă suma returnabilă e 801 USD sau mai mare.

Recuperare de taxe Rapidă – se aplică o taxă adițională de 33 USD.

Recuperare de taxe Urgentă – se aplică o taxă adițională de 99 USD.

Comisionul returnării taxelor **Social Security and Medicare (SSMT)** este de 10% din suma returnabilă dar nu mai puțin de 80 USD.

Căutarea documentelor lipsă: Dacă nu ai formularul W-2 SAU ultimul(e) pay-slip(s) RT Tax va contacta angajatorul tau pentru a obține o copie a formularului tau W2. Taxa acestui serviciu este de 15 USD.

VĂ RUGĂM SĂ FOLOSIȚI LITERE DIN ALFABETUL ENGLEZESC!

Prenume:

Al doilea prenume:

Nume:

Data nașterii: 19 __ / __ / __ z

Tel. fix.:

Tel. mobil.:

Adresa de e-mail:

Tipul rambursării: GENERAL RAPID DE URGENȚĂ Serviciul De Urgență e disponibil doar pentru rambursări din anul curent

Număr Social Security: — —

Data în care ai ajuns în SUA: 20 __ a / __ l / __ z

Data în care ai părăsit SUA: 20 __ a / __ l / __ z

Pentru ce an(i) dorești ca RT Tax să-ți recupereze taxele?

Ai mai aplicat pentru recuperarea acestor taxe la o altă companie sau individual? Da Nu

Câți angajatori ai avut: În care stat ai lucrat?

Informații loc de muncă

Trebuie să treci TOȚI ANGAJATORII (chiar dacă nu ai plătit taxe la acel loc de muncă) și să ne furnizezi

ULTIMUL (ULTIMELE) PAY-SLIP(URI) sau formularele W-2. Dacă nu le ai, te vom ajuta să le obții.

1. Compania:

Adresa:

Tel/Fax:

E-mail:

Am formularul W-2 sau ultimul pay-slip de la acest loc de muncă Da Nu

Dacă NU, doresc ca RT Tax să-l recupereze Da Nu

2. Compania:

Adresa:

Tel/Fax:

E-mail:

Am formularul W-2 sau ultimul pay-slip de la acest loc de muncă Da Nu

Dacă NU, doresc ca RT Tax să-l recupereze Da Nu

Client notes:

RT Tax notes:

Income:

Taxes paid:

3. Compania:

Adresa:

Tel/Fax:

E-mail:

Am formularul W-2 sau ultimul pay-slip de la acest loc de muncă Da Nu

Dacă NU, doresc ca RT Tax să-l recupereze Da Nu

4. Compania:

Adresa:

Tel/Fax:

E-mail:

Am formularul W-2 sau ultimul pay-slip de la acest loc de muncă Da Nu

Dacă NU, doresc ca RT Tax să-l recupereze Da Nu

Semnând acest formular declar că informațiile, oferite de mine sunt corecte și complete.

Semnătura:

Date:



Power of attorney

I, the undersigned,
 date of birth, Social Security number, residing at,
 (hereinafter referred to as the "Principal"), hereby grant a power of attorney to the company, Rinkos Tinklas, Ltd (dba RT Tax) its officers and/or employees with its registered address at Laisves Al. 67, Kaunas, Lithuania (hereinafter referred to as the "Agent"), to sign, verify and file all the principal's federal, state, social security and medicare, local income and other tax returns; pay all taxes; receive all tax refunds; examine and copy all the principal's tax returns and records; represent the principal before any federal, state or local revenue agency or taxing body 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 Rinkos Tinklas, Ltd its officers and/or employees are given the authority:

1. To act as an agent in dealing with the Principal's income tax return applications for the tax years 2007-2011.
2. To request from the employer and to receive Principal's W-2 form to the address:
RT Tax, P.O. Box 5260, Woodridge, IL 60517.
3. To use own postal address on the Principal's tax returns. To receive all correspondence from the IRS and State Tax Authorities. To receive Personal Income Tax refund checks issued in Principal's name.

Signed this day of, 20..... .

Signature of the Principal:

I, the undersigned,
 date of birth, Social Security number.....,(hereinafter referred to as the "Principal") hereby appoint A & Z Group, UAB officers and/or employees (hereinafter referred to as the "Agent") as his/her attorney to receive, endorse, and collect checks payable to the order of the undersigned.

On the basis of this power of attorney Agent is given the authority to deposit Principal's Income Tax refund checks to its own bank account, and convey the collected funds to the Principal or his designee by way of a bank transfer, check or to handle in another manner so as to achieve the same purpose. Agent can use the third party to convey the collected funds to the Principal.

Signed this day of, 20..... .

Signature of the Principal:

- 7 Notices and communications.** Original notices and other written communications will be sent to you and a copy to the first representative listed on line 2.
- a** If you also want the second representative listed to receive a copy of notices and communications, check this box
- b** If you do not want any notices or communications sent to your representative(s), check this box

8 Retention/revocation of prior power(s) of attorney. The filing of this power of attorney automatically revokes all earlier power(s) of attorney on file with the Internal Revenue Service for the same tax matters and years or periods covered by this document. If you **do not** want to revoke a prior power of attorney, check here.

YOU MUST ATTACH A COPY OF ANY POWER OF ATTORNEY YOU WANT TO REMAIN IN EFFECT.

9 Signature of taxpayer(s). If a tax matter concerns a joint return, **both** husband and wife must sign if joint representation is requested, otherwise, see the instructions. If signed by a corporate officer, partner, guardian, tax matters partner, executor, receiver, administrator, or trustee on behalf of the taxpayer, I certify that I have the authority to execute this form on behalf of the taxpayer.

▶ IF NOT SIGNED AND DATED, THIS POWER OF ATTORNEY WILL BE RETURNED.

Signature	Date	Title (if applicable)
Print Name	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> PIN Number	Print name of taxpayer from line 1 if other than individual

Signature	Date	Title (if applicable)
Print Name	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> PIN Number	

Part II Declaration of Representative

Caution: *Students with a special order to represent taxpayers in qualified Low Income Taxpayer Clinics or the Student Tax Clinic Program (levels k and l), see the instructions for Part II.*

Under penalties of perjury, I declare that:

- I am not currently under suspension or disbarment from practice before the Internal Revenue Service;
- I am aware of regulations contained in Circular 230 (31 CFR, Part 10), as amended, concerning the practice of attorneys, certified public accountants, enrolled agents, enrolled actuaries, and others;
- I am authorized to represent the taxpayer(s) identified in Part I for the tax matter(s) specified there; and
- I am one of the following:
 - a** Attorney—a member in good standing of the bar of the highest court of the jurisdiction shown below.
 - b** Certified Public Accountant—duly qualified to practice as a certified public accountant in the jurisdiction shown below.
 - c** Enrolled Agent—enrolled as an agent under the requirements of Circular 230.
 - d** Officer—a bona fide officer of the taxpayer’s organization.
 - e** Full-Time Employee—a full-time employee of the taxpayer.
 - f** Family Member—a member of the taxpayer’s immediate family (for example, spouse, parent, child, brother, or sister).
 - g** Enrolled Actuary—enrolled as an actuary by the Joint Board for the Enrollment of Actuaries under 29 U.S.C. 1242 (the authority to practice before the Internal Revenue Service is limited by section 10.3(d) of Circular 230).
 - h** Unenrolled Return Preparer—the authority to practice before the Internal Revenue Service is limited by Circular 230, section 10.7(c)(1)(viii). You must have prepared the return in question and the return must be under examination by the IRS. See **Unenrolled Return Preparer** on page 1 of the instructions.
 - k** Student Attorney—student who receives permission to practice before the IRS by virtue of their status as a law student under section 10.7(d) of Circular 230.
 - l** Student CPA—student who receives permission to practice before the IRS by virtue of their status as a CPA student under section 10.7(d) of Circular 230.
 - r** Enrolled Retirement Plan Agent—enrolled as a retirement plan agent under the requirements of Circular 230 (the authority to practice before the Internal Revenue Service is limited by section 10.3(e)).

▶ IF THIS DECLARATION OF REPRESENTATIVE IS NOT SIGNED AND DATED, THE POWER OF ATTORNEY WILL BE RETURNED. See the Part II instructions.

Designation—Insert above letter (a–r)	Jurisdiction (state) or identification	Signature	Date

Place:

Signed this day of, 20.....

RT Tax.com, hereinafter named **SERVICE PROVIDER**, and.....
hereinafter named **CUSTOMER**, have concluded the following agreement:

1. Subject of the Agreement

1.1 SERVICE PROVIDER obliges itself according to the order of CUSTOMER to draw up the documents necessary for the refund of the taxes overpayment of CUSTOMER paid in the United States of America (USA), United Kingdom, Ireland, Canada, Norway, Nederland or Germany under legal labor relations and to present them to the corresponding tax institutions and CUSTOMER obliges himself to pay for the rendered services.

2. Obligations of the Parties

2.1 SERVICE PROVIDER rights and obligations:

2.1.1 To complete and process all the required documents and present them to the corresponding tax institutions for the tax refund overpayment (hereinafter named tax refund)

2.1.2 To use its authority under this agreement and power of attorney (if necessary) for the preparation, signing and filing of tax returns, and for receiving all correspondence, including tax refund checks, from tax authorities

2.1.3 To fax, email or mail this signed Agreement to CUSTOMER at any time upon request.

2.2 CUSTOMER rights and obligations:

2.2.1 To present to SERVICE PROVIDER all the required documents and to sign necessary documents and forms for the performance of the service defined in this agreement and to provide true, accurate and correct information necessary for the completion of the tax refund.

2.2.2 To present W-2 form to SERVICE PROVIDER if CUSTOMER had legal labor relations in the states such as Virginia or Alabama. If W-2 form cannot be provided by CUSTOMER, form retrieval service described in 2.2.7 is started by SERVICE PROVIDER.

2.2.3 By signing this agreement and power of attorney (if necessary) to give SERVICE PROVIDER the authority to prepare, sign and file tax return and to receive all correspondence, including tax refund checks, from tax authorities.

2.2.4 During the period of validity of this agreement not to apply for the tax refund and not to sign agreements with other juridical or natural persons regarding the rendering of analogous service.

2.2.5 If for some reason the tax administrators of any foreign country deliver overpaid taxes directly to CUSTOMER, he/she must immediately inform SERVICE PROVIDER about it and pay remuneration, as per the agreement, not later than within 5 work days since the day of money receipt.

2.2.6 To pay to SERVICE PROVIDER service fees for each financial year:

USA tax refund (Federal and State): If the tax refund amount is between 0-200 USD, the service fee is 50 USD; 201-600 USD, the service fee is 70 USD; 601-800 USD, the service fee is 80 USD; 801 and more USD, the service fee is 10 % from the refund amount.

USA tax refund (Social Security and Medicare): the service fee is 10 % from the refund amount, but not less than 80 USD

United Kingdom: If the tax refund amount is between 0-100 GBP, the service fee is 35 GBP; 101-400 GBP, the service fee is 50 GBP; 401-800 GBP, the service fee is 55 GBP; 801 and more GBP, the service fee is 11 % from the refund amount.

Ireland: the service fee is 11 % from the refund amount, but not less than 60 EUR

Canada: the service fee is 11 % from the refund amount, but not less than 70 CAD

Norway: the service fee is 14 % from the refund amount, but not less than 80 EUR

Nederland: the service fee is 14 % from the refund amount, but not less than 45 EUR

Germany: the service fee is 14 % from the refund amount, but not less than 50 EUR

2.2.7 To pay the following fee for the retrieval service of each form: W2 (USA) - 15 USD, P-45/P-60 (England) - 15 GBP, P-60 (Ireland) - 17 EURO, T-4 (Canada) - 15 CAD, RF-1015B (Norway) - 17 EURO, "Jaaropgaaf" form (Nederland) - 17 EUR, "Lohnsteuerkarte" (Germany) - 17 EUR.

2.2.8 To pay fees and costs occurred in the refund process and could not be foreseen at the moment of signing of this agreement.

2.2.9. If CUSTOMER unilaterally terminates or withdraws from execution of the present agreement without the substantial breach of SERVICE PROVIDER, or during the period of validity of this agreement signs agreement, with other juridical or natural person regarding the rendering of analogous services, CUSTOMER shall pay SERVICE PROVIDER a fine at the amount of 100 USD.

2.2.10 Immediately inform SERVICE PROVIDER of the new employment or self employment in a foreign country and inform SERVICE PROVIDER of any changes in CUSTOMER contact details.

2.2.11 CUSTOMER is entitled to withdraw from this Agreement at no cost as long as a tax return has not been filed. Such notice of withdrawal can be made by telephone call, email, or in writing.

4. Manner of Settling Disputes

4.1. The disputes arising between the parties regarding this agreement or during the performance of this agreement are settled in the way of negotiations. In the case of failure to come to an agreement the disputes are settled in the court in Lithuania.

5. Force majeure

5.1 The party is excused from responsibility for the failure to fulfill the agreement if it proves that the agreement had not been fulfilled due to the circumstances which it could not control and reasonably foresee at the moment of concluding the agreement and that it could not prevent the appearance of these circumstances or their consequences.

5.2 The party, which has not fulfilled the agreement, must inform the other party on the appearance of force majeure circumstances and their influence to fulfilling of this agreement.

6. Conditions Eliminating Responsibility

6.1 In the event of amendment of the USA, United Kingdom, Ireland, Norway, Nederland or German laws, rules and regulations, manner of refunding taxes or due to the circumstances, which were not known to SERVICE PROVIDER, SERVICE PROVIDER is not responsible for any negative consequences, which the CUSTOMER underwent due to the amendment of the earlier mentioned countries laws, rules and regulations or manner of refunding taxes.

6.2 SERVICE PROVIDER is not responsible for the delays in refunding taxes if any foreign tax institutions cause it.

6.3 SERVICE PROVIDER is not responsible for the failure or delay to refund taxes, or for the tax liability, or for any other negative consequences, which occurred due to false, inaccurate or incomplete information or required documents provided by CUSTOMER or due to CUSTOMER'S prior financial commitments to any foreign country tax or other institutions.

6.4 The final amount of the taxes subject to refund shall be established by a competent institution of the foreign country. The amounts calculated by SERVICE PROVIDER are of the recommendatory nature and do not empower CUSTOMER to claim for the preliminary calculated overpaid taxes.

7. Duration of the Agreement and Other Conditions

7.1 The agreement comes into force beginning with the date of its signing and is valid till the obligations taken upon the parties are completely fulfilled.

7.2 All the amendments or supplements of this agreement are valid only in the case if they have been drawn up in writing and signed by representatives authorized by the parties of the agreement.

7.3 SERVICE PROVIDER is entitled to withdraw from this agreement if CUSTOMER breaches his/her obligations.

8 The particulars and signatures of the parties:

SERVICE PROVIDER

RTTax.com
 Laisves al. 67, Kaunas
 Lithuania LT-44304

CUSTOMER

.....
 (please print your full name)

.....
 (signature)