

STATE OF SOUTH CAROLINA DEPARTMENT OF REVENUE

REFUND TRACER

SC391 (Rev. 7/95)

3101

PLEASE ALLOW AT LEAST TEN WEEKS TO PROCESS A RETURN BEFORE FILING THIS FORM!

F A JOINT OR COMBINED RETURN, 1. YOUR NAME	ETURN, SHOW THE NAMES OF BOTH HUSBAND AND WIFE ON LINES 1 AND 2 BELOW. 2. SPOUSE'S NAME (IF A NAME IS ENTERED HERE.SPOUSE SHOULD SIGN ON LINE 16.)				
3. STREET	CITY		STATE		ZIP CODE
IF YOU HAVE MOVED SINCE F	TLING YOUR RETU	RN. YOUR PRESEN	T MAILING ADDRES	SS. INCLUDING	G ZIP CODE.
4. STREET	CITY		STATE		ZIP CODE
IF YOU WISH, PLEASE GIVE A PHONE NUMBER WHERE YOU C BETWEEN 8:30 A.M. AND 5:00 P.M. INCLUDE AREA CODE.			E REACHED	AREA CODE	Number
	☐ SC 1040 ☐ SC 1040A ☐ SC 1040NR 6. T. ☐ SC 1040X ☐ SC 1120 ☐ SC 1041			6. TAX I	PERIOD ENDED
_			CATION	'	
8. I RECEIVED A TAX REFUI 9. I HAVE RECEIVED CORRI 10. AMOUNT OF REFUND S 11. DATE I FILED THE RETURN: 12. I IF THE DEPARTMENT OF PLEASE WRITE YOUR NAMES BE JOINT OR COMBINED RETURN. THE	ESPONDENCE ABOU' CORRESPONDENCE SHOWN ON RETURN: REVENUE CANNOT LOW EXACTLY AS THE	T THIS RETURN. (P. ABOUT THIS RET : \$ LOCATE THE CHEC HEY WERE WRITTEN OTH HUSBAND AND URE	LEASE ATTACH A COURN. K. I REQUEST PAYME ON THE RETURN. IF	OPY, IF POSSIBI ENT BE STOPPE THIS CHECK W	LE.) ED AND A NEW CHECK ISSUED. WAS A REFUND ON A
ALL OTHER RETURNS (CORPORATION, TRUST, ETC.)	18. SIGNATURE OF PERSON AUTHORIZED TO SIGN 20. DATE 21. EMPLOYER IDENTIFICATION NO.			19. TITLE	'
	DECOR	IDTION OF CHECK	(EOD OFFICE HGE O	ATT XZ)	
FILE NUMBER	DESCRIPTION OF CHECK DATE OF SEARCH		AMOUNT OF REFUND		REFUND CHECK NUMBER
DATE ON REFUND CHECK	REMARKS:				

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Delays are caused by (1) filing improper income tax form (2)attaching improper wage and tax statement (3) the failure to attach a copy of the other state's income tax return when claiming a tax credit. Any errors found when processing the income tax return will cause further delay in issuing a refund check.

If your return has been filed and you have failed to receive your refund within the time limit, as stated, a record search will be made upon request. Complete this form, furnishing the required data. A reply will be made advising you of the results of the record search.

Mail the completed form to: SC DEPARTMENT OF REVENUE