HI HEMA,

I GIVE MY CONSENT TO FILE MY TAXES. AND I WILL FILL THE REQUIRED DETAILS BELOW

|  |  |
| --- | --- |
| **BANK NAME** |  CHASE |
| **ROUTING NUMBER (PAPER/ELECTRONIC)** |  267084131 |
| **ACCOUNT NUMBER** |  707677792 |
| **CHECKING / SAVING ACCOUNT** |  CHECKING |
| **ACCOUNT HOLDER** |  SAI ROHIT PAREPALLI |

|  |  |  |
| --- | --- | --- |
| **DRIVING LICENSE/ STATE ISSUED PHOTO ID** | **TAXPAYER** | **SPOUSE** |
| **NUMBER** |  P614780982970 |  NA |
| **ISSUED STATE** |  FLORIDA |  NA |
| **ISSUED DATE** |  02/17/2023 |  NA |
| **EXPIRATION DATE** | 11/11/2023  | NA  |
| **TYPE OF ID (DRIVING LICENSE / STATE ISSUED ID)** | DRIVING LICENSE  | NA  |
| INDIAN ADDRESS : | VILLA NO 119, VILLA ORCHIDS, KOWKOOR, SECUNDERABAD, TELANGANA, INDIA, 500010.  |  NA |

PLEASE LET ME KNOW IF ANY ADDITIONAL DOCUMENTS ARE REQUIRED.

THANKS WITH REGARDS,

PAREPALLI SAI ROHIT

9299207723.