Foreign EarneX = bWca Y'Cf[Ub]nYf Please complete this form as accurately as possible with exact dates					
Tax Year:			tax defen	50	
Client Name:			NETWORK		
Foreign Address, including country:					
Occupation:					
Employer Name:					
Employer U.S. Address:					
Employer Foreign Address:					
Is your employer a U.S. comp Please select ONE of the follo	oany or a foreign co	mpany? our living guarters while o	overseas:		
I purchased a home overseas		.	I rented a home/apartment overseas		
I rented a room overseas			Quarters were furnished by my employer		
Please be aware that the IF	RS has a number of	f rules, restrictions and re	egulations pertaining to the foreign earned	d income exclusion	
and because of this we are	unable to guarante	ee acceptance of this exc	clusion on your tax returns. Please see IF	RS Publication 54 fo	
more information.	· ·	•	•		
DAYS ABROA	D/TRAVEL	INFORMATI	ON		
Departure Date from United State			Return Date to the United States:		
Principal Country of Employmen Tax Year:					
Did you travel to the U.S. during	your				
time overseas?			If Yes, Please Provide the Travel Dates: If Yes, Please Provide the		
Did you earn income while in the			Amount/Details:		
Did you travel to another country besides U.S.?	′		If Yes, Please Provide Travel Dates:		
If Yes, Please Provide Country N	ames		Purpose of Travel:		
FOREIGN EAR		ME INFORM			
Total wages, salaries, bonuse commissions, etc.:	es, \$				
Allowances, Reimbursements, or Paid Expenses					
	\$			\$	
Family:	\$		Education:	\$	
Home Leave:	3		Quarters:	3	
	\$	Type/Details			
Any Other Reimbursements: Any Other Foreign Income:	\$	Type/Details			
7y Outer to origin modifie.	I	l			
		Date Sign	ature of Partner/Spouse	 Date	