



GOVERNMENT OF ANTIGUA AND BARBUDA

*MINISTRY OF FINANCE
Inland Revenue Department
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DROPOBOX INFORMATION FOR INLAND REVENUE DEPARTMENT

Name of Business

Name of Individual

Current Mailing Address

Block and Parcel Number

E-mail address

Telephone number

Cell number

Fax Number

Please assist us with assisting you. Kindly provide us with your contact information for easy processing of your documents and payments. Please indicate your preference to receive receipts.

E-mail **Fax** **Postal Mail**