

Department of the Treasury - Internal Revenue Service  
**Application for Magnetic Media  
Reporting of Currency Transactions**

**Internal use  
only**

Transmitter control code

1. Name and address of organization ( <i>street, city, state, zip code</i> )	2a. Name of person to contact about this request  2b. Title of person to contact about this request  2c. Telephone number ( <i>include area code</i> )
3. Employer Identification Number ( <i>EIN</i> )	4. Calendar year for which you will begin to file on magnetic media
5a. Name and address of organization ( <i>street, city, state, zip code</i> )	5b. Employer Identification Number ( <i>EIN</i> )  5c. Transmitter control code ( <i>TCC</i> )

6. Type of documents being filed

4789-CTR   
  8362-CTRC   
  TDF-90-22.49-SARC   
  Other \_\_\_\_\_

8852-CTRCN   
  TDF-90-22.47-SAR   
  TDF-90-22.56-MSB SAR

If you are acting as transmitter, please list on a separate sheet the name, Employer Identification Number and TCC code of each filer for whom you will prepare magnetic media. Should you use software developed by a Vendor, please see instructions on reverse side.

**Type of filing**

**7. Magnetic Tape/Cartridge Parameters**  
(Check appropriate box(es))

Type of Media	Track ( <i>cartridge only</i> )
<input type="checkbox"/> Cartridge	<input type="checkbox"/> 18-track <input type="checkbox"/> 36-track

**8. Diskette Parameters**

Type of Media	Hardware	Software/Operating System or Software Vendor	Recording Mode
3 1/2" Diskette			ASCII

9. Person responsible for preparation of the documents

Name ( <i>type of print</i> )	Title
Signature	Date