

CAUTION

1981 Complete Packet included
TO KEEP EVERYTHING IN ORIGINAL CONTEXT

STATE OF SOUTH CAROLINA)
COUNTY OF ANDERSON)

AFFIDAVIT

I, Peder K. Jespersen, being duly sworn, do state and dispose under oath:

1. On April 15, 1981, I filed a lawful tax return on the IRS 1040 form for the tax year 1980 and attached to it:

NOTE
IT MAY BE CAUTIONS
BEEEN THE
1099s
ALONG WITH
GOT THE
RETURN

- a. Two 1099 forms.
- b. One W-2 form.
- c. An affidavit form where I stated that what I received was gross receipts, not income.
- d. An eight page memorandum based on U.S. Supreme Court and other court decision on "Are You Required".

2. I requested from the IRS a return of an overpayment of \$6,250.41, which was the total amount of income tax deducted from my wage including an overpayment of social security.

3. Starting Sept. 1981, I was audited by the IRS, called into the IRS office in Greenville, SC and I appeared there on Dec. 21, 1981, where I explained to IRS auditor Minnie Burchfield the legal basis of my return, i.e. "wages are not income."

4. On Feb. 12, 1982 I received in the U.S. Mail an IRS refund check of \$6,858.00, i.e. a refund of the entire amount including \$608.28 interest.

5. The refund packet was forwarded to me by The Carolina Patriots, lead by Dr. John Tate, and is almost identical to The Carolina Patriots current refund packet.

6. During the IRS harrassment audit, the agents lied to me, stated falsely that their rules were law, but I know what my rights were, showed them I knew, and protected myself and my family.

Sworn to me this 12
day of March 1982.

Shen O. Clarkson

Notary Public, State of SC
My commission expires 1/13/85

Peder K. Jespersen

Peder K. Jespersen

TREASURY
FISCAL SERVICE
DIVISION OF DEBT MANAGEMENT
BIRMINGHAM, ALABAMA

Check for **68,498,748**
SYMBOL 3501

United States Treasury 15-51/000

PAY TO THE
ORDER OF PEDER K. JESPERSEN

MONTH	DAY	YEAR	RT-3	BOX	575F
02	12	82			

12/80 PIEDMONT SC 29673

48 TAX REF
ATLANTA 57

INT 608.25

DO NOT FOLD, SPINCLE OR MUTILATE. KNOW YOUR ENDORSE. REQUIRE IDENTIFICATION.

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For Privacy Act Notice, see Instructions For the year January 1–December 31, 1980, or other tax year beginning 1980, ending 19

Use IRS label. Otherwise, please print or type. Your first name and initial (if joint return, also give spouse's name and initial) Last name PEDER K. JESPERSEN Present home address (Number and street, including apartment number, or rural route) ROUTE # 3 BOX 575 F City, town or post office, State and ZIP code PIEDMONT S.C. 29673 Your occupation HIRED PERSON Spouse's occupation

Presidential Election Campaign Fund Do you want \$1 to go to this fund? Yes No If joint return, does your spouse want \$1 to go to this fund? Yes No Note: Checking "Yes" will not increase your tax or reduce your refund.

Requested by Census Bureau for Revenue Sharing A Where do you live (actual location of residence)? (See page 2 of Instructions.) State City, village, borough, etc. S.C. PIEDMONT B Do you live within the legal limits of a city, village, etc.? Yes No C In what county do you live? ANDERSON D In what township do you live? PIEDMONT

Filing Status 1 Single 2 Married filing joint return (even if only one had income) 3 Married filing separate return. Enter spouse's social security no. above and full name here KATHERINE B. 4 Head of household. (See page 6 of Instructions.) If qualifying person is your unmarried child, enter child's name 5 Qualifying widow(er) with dependent child (Year spouse died 19).

Exemptions 6a Yourself 65 or over Blind b Spouse 65 or over Blind Enter number of boxes checked on 6a and b 1 c First names of your dependent children who lived with you Enter number of children listed on 6c N/A d Other dependents. (1) Name (2) Relationship (3) Number of months lived in your home (4) Did dependent have income of \$1,000 or more? (5) Did you provide more than one-half of dependent's support? Enter number of other dependents Add numbers entered in boxes above N/A 7 Total number of exemptions claimed

Income 8 Wages, salaries, tips, etc. 8 621 22 9 Interest income (attach Schedule B if over \$400) 9 0 00 10a Dividends (attach Schedule B if over \$400) 10a 0 00 10b Exclusion 10b 0 00 10c Subtract line 10b from line 10a 10c 0 00 11 Refunds of State and local income taxes (do not enter an amount unless you deducted those taxes in an earlier year—see page 9 of Instructions) 11 0 00 12 Alimony received 12 0 00 13 Business income or (loss) (attach Schedule C) 13 0 00 14 Capital gain or (loss) (attach Schedule D) 14 0 00 15 40% of capital gain distributions not reported on line 14 (See page 9 of Instructions) 15 0 00 16 Supplemental gains or (losses) (attach Form 4797) 16 0 00 17 Fully taxable pensions and annuities not reported on line 18 17 0 00 18 Pensions, annuities, rents, royalties, partnerships, etc. (attach Schedule E) 18 0 00 19 Farm income or (loss) (attach Schedule F) 19 0 00 20a Unemployment compensation (insurance). Total received 20a 0 00 b Taxable amount, if any, from worksheet on page 10 of Instructions 20b 0 00 21 Other income (state nature and source—see page 10 of Instructions) 21 0 00 22 Total income. Add amounts in column for lines 8 through 21 22 621 22

Adjustments to Income 23 Moving expense (attach Form 3903 or 3903F) 23 0 00 24 Employee business expenses (attach Form 2106) 24 0 00 25 Payments to an IRA (enter code from page 10) 25 0 00 26 Payments to a Keogh (H.R. 10) retirement plan 26 0 00 27 Interest penalty on early withdrawal of savings 27 0 00 28 Alimony paid 28 0 00 29 Disability income exclusion (attach Form 2440) 29 0 00 30 Total adjustments. Add lines 23 through 29 30 0 00

Adjusted Gross Income 31 Adjusted gross income. Subtract line 30 from line 22. If this line is less than \$10,000, see "Earned Income Credit" (line 57) on pages 13 and 14 of Instructions. If you want IRS to figure your tax, see page 3 of Instructions. 31 621 22

Tax Computation
(See Instructions on page 11)

32	Amount from line 31 (adjusted gross income)	32	621	22
33	If you do not itemize deductions, enter zero	33	0	00
If you itemize, complete Schedule A (Form 1040) and enter the amount from Schedule A, line 41				
Caution: If you have unearned income and can be claimed as a dependent on your parent's return, check here <input type="checkbox"/> and see page 11 of the Instructions. Also see page 11 of the Instructions if:				
<ul style="list-style-type: none"> You are married filing a separate return and your spouse itemizes deductions, OR You file Form 4563, OR You are a dual-status alien. 				
34	Subtract line 33 from line 32. Use the amount on line 34 to find your tax from the Tax Tables, or to figure your tax on Schedule TC, Part I	34	621	22
Use Schedule TC, Part I, and the Tax Rate Schedules ONLY if:				
<ul style="list-style-type: none"> Line 34 is more than \$20,000 (\$40,000 if you checked Filing Status Box 2 or 5), OR You have more exemptions than are shown in the Tax Table for your filing status, OR You use Schedule G or Form 4726 to figure your tax. 				
Otherwise, you MUST use the Tax Tables to find your tax.				
35	Tax. Enter tax here and check if from <input type="checkbox"/> Tax Tables or <input type="checkbox"/> Schedule TC	35	0	00
36	Additional taxes. (See page 12 of Instructions.) Enter here and check if from <input type="checkbox"/> Form 4970, <input type="checkbox"/> Form 4972, <input type="checkbox"/> Form 5544, <input type="checkbox"/> Form 5405, or <input type="checkbox"/> Section 72(m)(5) penalty tax	36	0	00
37	Total. Add lines 35 and 36	37	0	00

Credits
(See Instructions on page 12)

38	Credit for contributions to candidates for public office	38	0	00
39	Credit for the elderly (attach Schedules R&RP)	39	0	00
40	Credit for child and dependent care expenses (attach Form 2441)	40	0	00
41	Investment credit (attach Form 3468)	41	0	00
42	Foreign tax credit (attach Form 1116)	42	0	00
43	Work incentive (WIN) credit (attach Form 4874)	43	0	00
44	Jobs credit (attach Form 5884)	44	0	00
45	Residential energy credits (attach Form 5695)	45	0	00
46	Total credits. Add lines 38 through 45	46	0	00
47	Balance. Subtract line 46 from line 37 and enter difference (but not less than zero)	47	0	00

Other Taxes
(Including Advance EIC Payments)

48	Self-employment tax (attach Schedule SE)	48	0	00
49a	Minimum tax. Attach Form 4625 and check here <input type="checkbox"/>	49a	0	00
49b	Alternative minimum tax. Attach Form 6251 and check here <input type="checkbox"/>	49b	0	00
50	Tax from recomputing prior-year investment credit (attach Form 4255)	50	0	00
51a	Social security (FICA) tax on tip income not reported to employer (attach Form 4137)	51a	0	00
51b	Uncollected employee FICA and RRTA tax on tips (from Form W-2)	51b	0	00
52	Tax on an IRA (attach Form 5329)	52	0	00
53	Advance earned income credit (EIC) payments received (from Form W-2)	53	0	00
54	Balance. Add lines 47 through 53	54	0	00

Payments
Attach Forms W-2, W-2G, and W-2P to front.

55	Total Federal income tax withheld	55	5548	57
56	1980 estimated tax payments and amount applied from 1979 return	56	0	00
57	Earned income credit. If line 32 is under \$10,000, see pages 13 and 14 of Instructions	57	0	00
58	Amount paid with Form 4868	58	0	00
59	Excess FICA and RRTA tax withheld (two or more employers)	59	701	84
60	Credit for Federal tax on special fuels and oils (attach Form 4136 or 4136-T)	60	0	00
61	Regulated Investment Company credit (attach Form 2439)	61	0	00
62	Total. Add lines 55 through 61	62	6250	41

Refund or Balance Due

63	If line 62 is larger than line 54, enter amount OVERPAID	63	6250	41
64	Amount of line 63 to be REFUNDED TO YOU	64	6250	41
65	Amount of line 63 to be applied to your 1981 estimated tax	65		
66	If line 54 is larger than line 62, enter BALANCE DUE. Attach check or money order for full amount payable to "Internal Revenue Service." Write your social security number on check or money order (Check <input type="checkbox"/> if Form 2210 (2210F) is attached. See page 15 of Instructions.) ▶ \$	66	0	00

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Preparer's signature: *[Signature]* Date: 4-15-81 Spouse's signature (if filing jointly, BOTH must sign even if only one had income)

Preparer's signature and date: *[Signature]* Date: 4-15-81

Firm's name (or yours, if self-employed) and address: _____

Check if self-employed:

Preparer's social security no.: _____

E.I. No.: _____

ZIP code: _____

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