REQUEST TO DISCLOSE INFORMATION: Please release my (our) information to: Name of Person or Company:_____ Contact at (Phone, Email, or Address):_____ Please disclose the following specific tax or account information (specify or put "All" for All) to the above named person or company for the purpose of (specify or put "Any" for Any) Release the information for: (Check the box and complete the information) □ 12/31 of Calendar Year ___ □ End of This Calendar Month □ Indefinitely until Revoked in Writing □ Other Specified Date/Time Range _____ **Privacy Policy:** We do not disclose any non-public personal information about our customers or former customers to anyone, except as instructed to do so by such customers or as required by law. We restrict access to non-public personal information to those professionals necessary to complete your tax return or resolve your tax problems. We maintain physical, electronic, and procedural safeguards to guard your non-public personal information. You are not required to complete this form to engage our services or as a condition of engagement. If we obtain your signature on this form by conditioning our services on your consent, your consent will not be valid. If you agree to disclose your information, your consent is valid for the amount of time that you specify. If you do not specify the duration of your consent, your consent is valid for one year from the date of your signature. This authorization will remain in effect unless revoked in writing. I (We) hereby authorize_____ and its employees to disclose the above information. Taxpayer Signature:_____ Date: Print Name:_____ Date: Spouse Signature: Print Name:

If submitting by fax or email, please enclose a legible copy of your photo id.

If you believe your tax information has been disclosed or used improperly in a manner unauthorized by law or without your permission, you may contact the Treasury Inspector General for Tax Administration (TIGTA) by telephone at 800-366-4484, or by email at complaints@tigta.treas.gov