

CONSENT TO RELEASE TAX RETURN INFORMATION

Federal law requires this consent form be provided to you. Unless authorized by law we cannot disclose, without your consent, your tax return information to third parties for purposes other than the preparation and filing of your tax return. If you consent to the disclosure of your tax return information, Federal law may not protect your tax return information from further use or distribution.

You are not required to complete this form. If we obtain your signature on this form by conditioning our serviced on your consent, your consent will not be valid. If you agree to the disclosure of your tax return 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.

1) Entity or person's name and SSN or Federal ID# of tax returns being authorized: _____

2) Tax Form(s) and Tax Year(s) being authorized: _____

3) Purpose for forwarding information:

Banking and/or Loan Requirements

Other (please specify) _____

4) Information is released to:

Name: _____

Address: _____

Phone: _____

Fax: _____

Email: _____

5) Duration of Consent (please check ONE)

On an as needed basis, with verbal consent

Indefinite

Specific Duration _____

I, _____, authorize Sargent, Sargent & Bryan, Inc. to disclose to the individual(s)/company listed above, my tax return information for the person or entities listed above.

Signature _____

Date _____

This form must be returned to Sargent, Sargent & Bryan, Inc. by mail, fax or email before any tax returns can be released.

If you believe your tax return information has been disclosed or used improperly in a manner unauthorized by law without your permission you may contact the Treasury Inspector General for Tax Administration (TIGTA) by telephone at 1-800-336-4484 or by email at complaints@tigta.treas.gov.