



Gig Harbor Tax and Accounting

15210 Stevens Rd SE

Olalla, WA 98335

www.gigharbortaxandaccounting.com

(253) 509-8928

CONSENT TO DISCLOSURE OF TAX RETURN INFORMATION

Federal law requires this consent form to 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 services 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.

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 1-800-366-4484, or by email to: complaints@tigta.treas.gov.

Purpose for forwarding information:

(Please provide the company name, contact name(s), contact phone number(s), email address, address, and duration of consent below.)

Name and address to which information is being disclosed to:

Company Name (if applicable) _____

Individual Name (if applicable) _____

Contact Number _____

Email Address _____

Street Address _____

City, State and Zip Code _____

Duration of Consent: _____ to _____

I, _____, authorize Gig Harbor Tax and Accounting to disclose to the above my tax return information on behalf of: Individual (s) signing below

Company: _____

Other: _____

Taxpayer Signature (or authorized individual): _____ Date: _____

Spouse Signature (if applicable): _____ Date: _____