



# Accurate Tax & Accounting, Ltd.

## Consent to Release Tax Returns When Other than the Taxpayer is picking up a Completed Tax Return

Client Name: \_\_\_\_\_

I hereby authorize Accurate Tax & Accounting, Ltd. to release my tax return (be specific).

Individual's Name: \_\_\_\_\_ OR \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

**This release is valid for ONE YEAR unless specified. "IF" you consent to more than the current year, please check one of the following:**

**Only the following years (specify)** \_\_\_\_\_

**Until I withdraw my consent**

**Provide the individual with:**

Original Federal and State tax returns, copies of the returns, electronic filing forms and all of the information used to prepare my returns.

Only the following specific information: \_\_\_\_\_

**The following three paragraphs are required by the IRS to be included in this document:**

1. Federal law requires this consent form be provided to you. Unless authorized by law, we cannot disclose your tax return information to third parties for purposes other than the preparation and filing of your tax return without your consent. 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.
2. You are not required to complete this form to engage our tax return preparation services. If we obtain your signature on this form by conditioning our tax return preparation 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 from the date of signature.
3. If you believe your tax return 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 1-800-366-4484, or by email at [complaints@tigta.treas.gov](mailto:complaints@tigta.treas.gov).

\_\_\_\_\_  
Taxpayer Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Spouse Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

IF MARRIED, AT LEAST ONE SIGNATURE IS NEEDED