



FOX VALLEY TAX SOLUTIONS

Written Authorization for Third Party Disclosures

(for tax return preparation or provision of auxiliary services)

Dear Client:

If you would like your records released to a third party, such as a mortgage lender, in accordance with Rev. Proc. 2013-14 you must sign this disclosure statement. A copy of this form is also available at www.FoxValleyTaxSolutions.com. Please return this form so that we may process your request.

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 those related to 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.

You are not required to complete this form. Because our ability to disclose your tax return information to another tax return preparer affects the tax return preparation service(s) that we provide to you and its (their) cost, we may decline to provide you with tax return preparation services or change the terms (including the cost) of the tax return preparation services that we provide to you if you do not sign this form. 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.

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.

Signed: _____ Date: _____

Note: If you would like Fox Valley Tax Solutions to release your information to a third-party, please provide the information requested below.

Name of Third Party Contact: _____

Phone # of Third Party Contact: _____

Information requested to be released: _____

Fax # of Third Party Contact: _____

or

Email address of Third Party Contact: _____

or

Mailing Address of Third Party Contact: _____
