

FROM: Your Name(s): _____
Your Address: _____
City, State & Zip: _____

Consent to Release Tax Return Information

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.

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 one year.

I (we) hereby authorize _____ to release the following requested information to the following individual and/or firm (to be completed by taxpayer):

Individual's Name (If Applicable): CAROLINE BATES EA

Firm Name (If Applicable): INCOME TAX SOLUTIONS INC.

Address: 327 HWY 43 N, SARALAND, AL 36571

Phone: 251-679-9216 Fax: 251-679-9217

E-mail: CAROL@SARALANDTAX.COM

Provide the Individual and/or Firm with:

Any information requested, or: All depreciation schedules

Only a copy of my Federal tax returns for year(s): _____

Copies of W-2's and/or 1099's? YES NO

Only the following specific information: _____

Authorized By:

(Your Signature) _____ Date: _____

(Spouse's Signature) _____ Date: _____

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.