CLIENT CONSENT TO DISCLOSURE OF 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 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.

Purpose for disclosing information: _____

_____

_____

Name and information to whom the information is being disclosed:

_____

_____

_____

_____

Duration of consent: _____

I, _____, authorize St. Sauver & Szabla
(PRINT YOUR NAME)

CPA's, Inc. to disclose to _____ my tax return
(PRINT THEIR NAME)

information for _____.
(TAX YEAR OR YEARS)

Signature: _____Date: _____

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.