



CONSENT TO DISCLOSURE OF TAX RETURN INFORMATION

Federal law requires this consent form 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 and, in certain limited circumstances, for purposes involving tax return preparation. 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.

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.

Please complete (to be completed by the taxpayer):

Information to be released: _____

Purpose for forwarding information: _____

Contact information for whom this documentation is being disclosed to:

Name: _____ Phone: _____
 Address: _____ Fax: _____
 E-mail: _____

Duration of consent: _____

I, _____, authorize Shah & Trivedi CPA, PLLC to disclose to my tax return information for the year(s) ending _____ to _____.

 Signature of Taxpayer

 Date

 Signature of Spouse

 Date

If you believe that your tax return 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