

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. 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. If we obtain your signature on this form by conditioning our services on your consent, your consent will not be valid. Your consent is valid for the amount of time you specify. **If you do not specify the duration of your consent, your consent will be valid for one year.**

I (name) _____ authorize Brotemarkle, Davis & Co., LLP to disclose my tax return information for year(s) _____ to the following person for the purpose specified:

___ Investment advisor (name/company/purpose, enter address below):

___ Banker (name/company/purpose, enter address below):

___ Title company (name/company/purpose, enter address below):

_ Other (name/company/purpose, enter address below):

Address: _____

Telephone number : _____ **Fax number :** _____

E-mail: _____

Duration of consent (optional – one year unless otherwise specified): _____

If you believe your tax return information has been disclosed or used improperly in a manner unauthorized by law of 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.

Taxpayer signature: _____ Date: _____
Spouse signature: _____ Date: _____