

**CONSENT TO DISCLOSE INCOME TAX FORMS AND/OR INFORMATION**  
**NELSON & COMPANY, P.S., CPAs**

Federal law (IRC Sect 7216) requires this consent form be provided to you. Unless authorized by law, Nelson & Company P.S. cannot disclose any of 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 you sign 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.

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](mailto:complaints@tigta.treas.gov).

The section below to be completed by client/taxpayer:

Duration of Consent: (optional): \_\_\_\_\_

I, \_\_\_\_\_

**authorize Nelson & Company, P.S., CPAs to disclose the tax forms and/or information below (ex: tax return):**

\_\_\_\_\_  
\_\_\_\_\_

**to:** (identify the recipient of the tax form and/or information and their contact information)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**for the purpose of:** (specify intent of the disclosure)

\_\_\_\_\_  
\_\_\_\_\_

Taxpayer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Taxpayer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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