

# Consent to Disclosure of Tax Return, Accounting, and/or Payroll 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:** To facilitate the of transfer of necessary and pertinent information to the successor CPA firm below to ensure the continuity of services and the complete and accurate preparation of any ongoing projects.

**Name of recipient:** Bell CPA LLC

The duration of this consent will continue as indicated below, unless **Bohl, House & Samek CPAs** is notified in writing to no longer disclose your tax return information to this recipient.

X Other: A period ending one (1) year from the date of signature below, or the day upon which the files subject to this consent have been provided to the recipient above, whichever occurs first.

If you approve the disclosure of your tax return information to **Bell CPA LLC** for the duration indicated above, please sign below.

If married, both spouses must sign the consent. For business clients, please include the name of the business and the name/title of the authorized representative executing this consent below.

Name: \_\_\_\_\_ Name/Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Signature: \_\_\_\_\_

Date: \_\_\_\_\_ Date: \_\_\_\_\_