



**Consent to Use 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. 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.

By signing the following you will give Jake Alexander and Alexander Financial LLC permission as your tax preparer to use and release information about your \_\_\_\_\_ tax return to an investment advisor or financial planner of your choosing, should you so direct, in order to properly advise you regarding making an Individual Retirement Account contribution as well as any other recommendations concerning tax planning or your investments. You, by reciprocal agreement, allow your investment advisor or financial planner to disclose financial information about you to Jake Alexander and Alexander Financial LLC. Finally, in the event my return(s) is/ are subject to review, audit, or examination by any taxing authority, Alexander Financial LLC is available to represent you or review any such event under separate agreement. 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).

**Acknowledgement**

I, \_\_\_\_\_, solemnly swear that the information that was forwarded to the tax preparer is true to the best of my knowledge. In no way am I attempting to file a fraudulent claim by providing the tax preparer with false documentation. I understand that if the information is false or conjured, that I am liable to a fine and/or imprisonment by the federal and/or my local government. I acknowledge that the information I have provided for the purpose of identifying and claiming deductions is appropriately supported by detailed records maintained by myself as required, and I assert that I can and shall provide that detail upon request. I assert that any anticipated substantial changes to my income or withholding for the tax years addressed by this agreement shall be disclosed to Alexander Financial LLC immediately. It is my responsibility to provide all documents required to complete my return(s) in a timely manner and prior to all due dates. Additionally, the IRS mandates that we get written permission from the filer prior to filling any extension requests, and by signing below I am specifically authorizing Alexander Financial LLC to file such extension requests, without additional consent, should Alexander Financial LLC deem it necessary. I also want to acknowledge that any wrong doing on my behalf is not a reflection of the tax preparer. Additionally, I consent to receive any tax refund via a bank product which will deduct any fees that I am liable for in conjunction with the service provided by Alexander Financial LLC. I acknowledge that I am liable for all unfunded portions of said fees, as well as for any fees or costs, including attorney's fees, in connection with the collection of unpaid fees if not paid within thirty (30) days of being notified by Alexander Financial LLC.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Spouse Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_