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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 for purposes other than the preparation and filing of your tax return.

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 that you specify. If you do not specify the duration of your consent, your consent is valid for one year.

The purpose of this consent is to allow us to disclose your tax return information to (name of financial services firm) to assist in advising you on retirement plans such as an IRA, SEP, or Roth IRA, purchase or sale of investments, managed funds accounts, and otherwise advise you on your financial investments.

_____ is a Registered Investment Advisor Agent and his license is held at (name of financial services firm). By signing this consent you also acknowledge that if you make an investment with (name of financial services firm) that (name of Registered Investment Advisor) will receive a part of any management fees or commissions paid on investments you make as a result.

We are not allowed by Federal law to use your tax information for any purpose other than to prepare your tax return unless you permit us by signing this statement.

If you approve use of your tax return information prepared by Scribner, Cohen and Company, S.C. for a period of _____ beginning _____ and ending _____ please sign below.

Signature: _____
Taxpayer

Print Name:_____ Date:_____

Signature: _____
Spouse, if joint return

Print Name:_____ Date:_____

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.