

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 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 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.

**Taxpayer's Name(s) (Please Print):** \_\_\_\_\_

The above-referenced Taxpayer hereby consents to the disclosure by Wipfli LLP, of any and all tax return information contained in the Taxpayer's tax return(s) for the calendar or fiscal years \_\_\_\_\_ . Your consent is valid for one year unless you indicate otherwise by checking the box below.

Taxpayer further consents to the release of tax return information for all future year tax returns until Taxpayer directs Wipfli otherwise.

This consent authorizes the disclosure of a copy of the entire tax return or all information contained within the tax return to a third party. However, you may request that we provide a more limited disclosure of such tax return information to the third party in accordance with your direction.

Wipfli LLP may release such information to the following individual(s) or organizations:

---

Such information is being released to the party or parties specified above for the following purpose(s):

---

Such information may not be disclosed or used by the tax return preparer for any purpose other than that permitted by this document.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

By: \_\_\_\_\_  
(Taxpayer's Signature)

\_\_\_\_\_  
(Spouse's Signature – If A Joint Return)

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).