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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 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.

You have indicated that you would like dMCPA, LLC to disclose your tax return information to a third party. In order to authorize this, please provide the information requested below, and sign and date your consent to the disclosure of your tax return information.

I, _____ (your name), authorize dMCPA, LLC to disclose to
_____ (third party name) that portion of my tax return information
for _____ (tax year) that is necessary for _____ (purpose of
information).

Signature _____ Date

Spouse Signature (if joint return) _____ 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 atcomplaints@tigta.treas.gov.