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## **Information Disclosure Authorization**

The following disclosure authorization is made ava	ilable to <b>DeMarco Wachter &amp; Co.</b> in order to
disclose information to secure	
I authorize you to provide the following information	n to
You are not re	equired 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	on, your consent is valid for the amount of time that
you specify. If your do not specify the duration of	your consent, your consent is valid for one year.
The following information is to be included in the	disclosure authorization:
Tax Return Form Year	
Other Information	
This consent is effective for:	
Taxpayer:	Date:
Spouse (if applicable):	Date

Taxpayers are not required to sign this consent. If you sign the consent, federal law may not protect your information from further disclosure. If you sign the consent you can set a time period for the duration of the consent. If you fail to set a time period, the consent is valid for a maximum of one year.

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 <a href="mailto:complaints@tigta.treas.gov">complaints@tigta.treas.gov</a>.