

Outside Authorization:

Please complete the following as CynTax's authorization for the release of information to the following individual:

Individual's Name: _____

Individual's Firm (if applicable): _____

Address: _____

Phone: _____ **Fax:** _____

E-mail: _____

Provide the individual with:

Any information requested, or

Only a copy of my tax returns for Years: _____

Only the following specific information:

Your Name: _____

Signature

Spouse's Name: _____

Spouse's Signature