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NOTICE OF CONSENT

Consent is sought for use of tax return information under any circumstance. Consent is sought for disclosure of tax return information in the context of tax return preparation or performance of auxiliary services (for example, where a tax return preparer seeks substantive advice from another tax return preparer which will affect the tax liability reported by a taxpayer). Consent is sought for disclosure of tax return information in the context other than tax return preparation or performance of auxiliary services. Disclosure may include the taxpayer's social security number.

Consent is required if you desire to, for example, request a copy of your tax return be provided to a third party (such as a bank) or additional copies be sent to you. Federal law requires this consent form be provided to you. Unless authorized by law, we cannot use, 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 you specify. If you do not specify the duration of your consent, your consent is valid for one year. Duration of consent (optional): , authorize ABJ & Associates, Inc. to use all information except that listed only the information listed for the purpose of \square only the purpose(s) listed. any purpose except those listed. (see below for lists of information and purpose) Note: If there are multiple reasons for requesting consent to use tax return information they may all be listed in one consent form. See Revenue Procedure 2008-35, section 6, for examples. 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. Accepted by: Taxpayer: Date Spouse: _____ Date _____ Information: