

## **Tax Return Request Authorization Form**

This form documents our customer's permission when requesting a copy of current/prior year tax returns

Complete one form for each taxpayer requesting the following types of returns:

- Federal returns prepared at any Jackson Hewitt location from 2010 to the present
- State returns prepared at any Jackson Hewitt location from 2010 to the present

Last four (4) digits of SSN for Requested Retur	n: XXX-XX		
Customer's Name (as filed):			
Year of tax return	prepared in	year.	
Year of tax return			
Year of tax return	_ prepared in	year.	
$\hfill\Box$ Print and Mail a copy of the return to the a	ddress on the returi	า.	
☐ Print and Mail a copy of the return to the address listed below.			
☐ Tax return printed and handed to the taxpayer requesting the copy			
**Attach a copy of the non-expired government picture ID presented with the request.			
I authorize Jackson Hewitt t	o release a copy of t	he tax return(s) indicated.	
Customer's Signature	 Date		
Customer's Address	Phone Nu	Phone Number including Area Code	
City, State, Zip			
Customer's Email Address			