

Client Agent Authorization for Tax Representation

Date: [Insert Date]

Client Name: [Client's Full Name]

Client Address: [Client's Address]

Client Phone: [Client's Phone Number]

Client Email: [Client's Email Address]

To Whom It May Concern,

I, [Client's Full Name], hereby authorize [Agent's Full Name or Firm's Name], located at [Agent's Address], to act on my behalf in all matters pertaining to tax representation.

This authorization includes, but is not limited to, the authority to:

- Prepare and file my tax returns.
- Communicate with the tax authorities regarding my tax matters.
- Receive and respond to notices and correspondence.
- Represent me in audits and appeals.

This authorization will remain in effect until [Insert Expiration Date] or until I revoke it in writing.

Thank you for your attention to this matter.

Sincerely,

[Client's Full Name]

[Client's Signature]

[Date of Signature]