Tax Filing Authorization

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

To Whom It May Concern,

I, [Client's Full Name], hereby authorize [Your Firm's Name] to act on my behalf in regard to my tax filing for the year [Insert Year]. I authorize them to prepare and submit my tax returns and provide necessary documents to the relevant authorities.

My details are as follows:

- Full Name: [Client's Full Name]
- Address: [Client's Address]
- Tax Identification Number: [Client's TIN]

This authorization is valid until [Insert Expiration Date], unless revoked in writing by me.

Thank you for your attention to this matter.

Sincerely,

[Client's Signature]

[Client's Printed Name]