

Jackson Hewitt[®]

TAX SERVICE

TAX RETURN REQUEST AUTHORIZATION FORM

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

This form can be used for the following types of returns: (complete one form for each SSN)

- Federal and State returns prepared at any Jackson Hewitt location from 1991 to the present
- *There is a \$20 fee per tax year for non-current Jackson Hewitt Clients*

Primary SSN for Requested Return: _____

Customer's Name (as filed): _____

(Secondary filers for Married Filing Joint may request a copy, but the primary SSN is needed to locate the return.)

Year of tax return _____ prepared in _____ year.

Year of tax return _____ prepared in _____ year.

Year of tax return _____ prepared in _____ year.

I would like to pick up a copy, no need to send it anywhere for me.

Print and Mail a copy of the return to the address on the return.

Print and Mail a copy of the return to the address listed below.

Fax a copy of the return to The Attention of: _____ Fax Number including Area Code: (_____)_____

The form must be accompanied by a copy of a picture ID.

I authorize Jackson Hewitt to release a copy of the tax return(s) indicated.

Customer's Signature

Date

Customer's Address

(_____)_____
Phone Number including Area Code

City, State, Zip

Employee Processing Request