

CONSENT TO DISCLOSURE OF TAX RETURN INFORMATION

For the purposes of this consent form, "we," "us," and "our" mean

Lillian T-Bowman

(Printed Name of Tax Preparer)

Federal law requires this consent form be provided to you ("you" refers to each taxpayer, if more than one). Unless authorized by law, we cannot disclose your tax return information to third parties for purposes other than the preparation and filing of your tax return without your consent. If you consent to the disclosure of your tax return information, Federal law may not protect your tax return information from further use or distribution.

You are not required to complete this form to engage in our tax preparation services. If we obtain your signature on this form by conditioning our services on your consent, your consent will not be valid. If you agree to the disclosure of your tax return information, your consent is valid for the amount of time that you specify. If you do not specify the duration of your consent, your consent is valid for one year from the date of signature.

You have indicated that you are interested in receiving an electronic disbursement service or loan ("Product or Service") from EPS Financial, a division of Pathward, National Association. To have your application processed by EPS Financial, we must disclose all of your 2022 tax return information. You have the right to request a more limited disclosure of tax return information, however you will not be eligible to apply for this Product or Service. If you would like us to disclose your 2022 tax return information for this purpose, please sign and date your consent to the disclosure of your tax return information.

By signing below, you authorize us to disclose to EPS Financial all of your 2022 tax return information to evaluate and process your application for the Product or Service. You understand that if you are unwilling to authorize the disclosure of your tax return information with EPS Financial, you will not be able to obtain the Product or Service, but you may still choose to have your tax return prepared and filed by us for a fee.

Printed Name of Taxpayer: X

Taxpayer Signature: X Date: X

Printed Name of Joint Taxpayer (if applicable): _____

Joint Taxpayer Signature (if applicable): _____ Date: _____

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 e-mail at complaints@tigta.treas.gov.