Tax Check Waiver

I am signing this waiver to permit the Internal Revenue Service (IRS) to release information about me which would otherwise be confidential. This information will be used in connection with my application for appointment to membership in the IRS Advisory Council/Information Reporting Program Advisory Committee. This waiver is made pursuant to 26 U.S.C. 6103(c).

I request that the IRS' Office of Government Liaison and Disclosure release the following information to the appropriate IRS officials, including, but not limited to, the Director, National Public Liaison.

		Check only one box per question		
1.	Have you failed to timely file a Federal income tax return by the required due date (determined regard to any extension(s) of time for filing) for any of the last three years for which filing of a might have been required? (Note: If the filing date [without regard to extensions] and normal processing period for the more recent year's return has not yet elapsed on the date IRS receives this waiver, and the IRS received on the indicate a return for the most recent year, the "last three years" will mean the three year preceding the year for which returns are currently being filed and processed.)	eturn ost ords		
2.	Have you failed to pay any tax, penalty, or interest liability during the current or last three cales years within ten (10) days of the date on which the IRS gave notice of the amount due and requested payment	ndar Yes No		
3.	Are you now or have you ever been under investigation for a misdemeanor or possible crimina offenses	al Yes No		
4.	Have any civil penalties for fraud been assessed against you during the current or last three calendar years	Yes No		
5.	If a return for any of the last three years was not filed, please explain why? If there was insufficient income to meet filing requirements or filing requirements were met by with a foreign tax agency (e.g., Puerto Rico or the Virgin Islands), please describe the circumstances in the Comments Section on page 2.	Yes No		
Names and addresses shown on last three returns (If different from the information shown on page two (2)).				
Υe	ear Name(s) Address			
1.	20			
2.	20			
2.	20			

I authorize the IRS to release any additional relevant informa To help the IRS find my tax records, I am voluntarily providing		
Name	Social Security Number	
Home street address		
City	State	ZIP Code
Home telephone number	Business/Work telephone number	
Applicant signature (Signature of the applicant authorizing th	e disclosure of confidential tax information)	
Date signed (This consent is valid only if received by the IRS	within sixty (60) calendar days of this date)	
If you are married and file a joint Federal tax return, your Spou	se must provide the following information	
Spouse's name	Social Security Number	
Spouse's signature (Signature of the spouse authorizing the	disclosure of confidential tax information)	
Date signed (This consent is valid only if received by the IRS	within sixty (60) calendar days of this date)	
PRIVACY ACT	T STATEMENT	
The Privacy Act of 1974 requires that when we ask you information asking for it, and how it will be used. We must also tell you what couvoluntary, required to obtain a benefit, or mandatory. Our legal right (E.O.) 9397. We are asking for this information to determine your suadvisor of the Internal Revenue Service. If you do not provide us with this information, it may adversely affects	uld happen if we do not receive it, and whether yo to ask you for the information is 5 U.S.C. 301 and uitability as an employee (direct hire or contracted)	our response is d Executive Order d, consultant or
with the appropriate IRS office(s) and may be disclosed to other fed	leral agencies as required by law. Requesting you	r Social Security

Comments (If you answered "Yes" to any question on page one (1), please explain why)

refusal to disclose it.