

Form REV187, Email Authorization

Read instructions before completing this form.

Taxpayer	Taxpayer Name			Social Security Number or ITIN		
	Street Address or PO Box			Minnesota or Federal Employ	Minnesota or Federal Employer Identification Number (FEIN)	
	Apt. or Suite			Phone Number	Fax Number	
	City	State	ZIP Code	Email Address	Copy me on all email	
ient	Name of Person to Receive Email			Attorney Number, Accountar	Attorney Number, Accountant Number, or PTIN	
Recipient	Email Address			Expiration Date	Expiration Date	
	This authorization is not valid u	until it is signed and	dated by the taxpa	yer, or someone with legal authority to	sign on behalf of the taxpayer.	
ure	Parent, Guardian, Conservator, or Officer: I certify that I have the legal authority to sign this form.					
Signature	Signature			Name and Title, If Applicable	Date / /	
	Send a signed copy of this form Mail: Minnesota Department o			ert St. St. Paul. MN 55146	'	

Fax: 651-556-5210

Email: MNDOR.POA@state.mn.us

Form REV187 Instructions

Purpose of This Form

By signing this form, you authorize the Minnesota Department of Revenue to exchange private or nonpublic data using unencrypted email with the person above. Unencrypted email is not secure.

You accept the risk in the unencrypted email that data may be intercepted by someone other than the intended recipient and understand that the department is not liable for any damages caused by such interception.

This form does not authorize the department to release private or nonpublic data to anyone other than the recipient unless there is a valid power of attorney on file.

Copy Me on All Email

You can receive a copy of the email sent to your recipient by checking the box next to your email address.

Your Signature

This authorization is not valid until it is signed and dated by someone with legal authority to sign it. For most people, this is the taxpayer whose information is being shared.

If granting authority for a joint return, only one spouse needs to sign. Parents or legal guardians must sign for minors.

For legal guardians, conservators, personal representatives, and others signing on behalf of the taxpayer, we require documents and a photo ID to confirm your legal authority.

We reserve the right to request additional information as needed.

Expiration

This authorization remains in effect until it expires, if indicated above, or is removed in writing. You may remove this authorization at any time.

Questions?

Website: www.revenue.state.mn.us Email: MNDOR.POA@state.mn.us Phone: 651-556-3003 or 1-800-657-3909