

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 returns prepared at any Jackson Hewitt location from 1991 to the present
- State returns prepared at any Jackson Hewitt location from 1991 to the present

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.

REASON FOR THE REQUEST:

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

Name: _____

Address: _____

City: _____

State: _____

Zip: _____

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

Please EMAIL:
[Returns@RRD-JH.COM](mailto>Returns@RRD-JH.COM) with a
copy of your ID.