

BOULDER CPA GROUP
AUTHORITY TO ACCESS CLIENT RECORDS THROUGH PORTAL

Name of Person(s): _____

Client #s: _____

This will authorize you to give the below person(s) access to my records through the NetClient CS Portal:

_____ Relationship: _____

_____ Relationship: _____

_____ Relationship: _____

Please give them access to the following records:

1040: _____

1041: _____

1065: _____

1120S: _____

1120: _____

Others: _____

Please do not disclose information to any other persons without written authorization from me. *All prior authorizations will remain in effect unless you advise us to cancel them.* Photocopies of this authorization are to be given the same effect as the original.

Signature

Signature

Date

Date