

NEW YORK STATE TAX RELEASE

This is to authorize the release to the New York City Department of Investigation all information appearing on my New York State income tax returns for the years 2019, 2020, 2021, 2022, and and 2023, and all information pertaining to the filing thereof, including date(s) of filing, collection and warrant information.

(Signature) **SSN:** _____

(Print Name) **Date:** _____

Former Last Name(s): _____

Current Address: _____
Street Address Apt City State Zip Code

Former Address: _____
Street Address Apt City State Zip Code

If You Filed Jointly With Your Spouse For Tax Years 2019 Through 2023	
Spouse's Name: _____	SSN: _____
Former Spouse's Name: _____	SSN: _____

<u>To be completed by the New York State Department of Taxation and Finance</u>						
<table border="1"><tr><td>2019</td></tr><tr><td>2020</td></tr><tr><td>2021</td></tr><tr><td>2022</td></tr><tr><td>2023</td></tr></table>	2019	2020	2021	2022	2023	
2019						
2020						
2021						
2022						
2023						
	_____ Verified by: (Print Name)					
	_____ Signature					
	_____/_____/_____ Date					