

SLK Financial Services

6260 Jones Rd – College Park, GA. – 30349
Office – 404.477.7241 Fax – 404.420.2047

Release Form

I declare that all the information I am providing to SLK Financial Services, LLC is true and correct to the best of my knowledge. I understand that in the event of an audit by the Internal Revenue Service, I am solely and completely responsible to provide written documentation and proof of all statements made on my tax return. I realize that SLK Financial Services, LLC is advising me and providing tax services to the best of their knowledge and belief; however, SLK Financial Services is in no way liable for the content of my return.

The undersigned hereby jointly and severally releases, acquits, forgives, and discharges SLK Financial Services, LLC from any actions, claims, demands, suits, agreements, judgments, liabilities, and proceedings, whether arising in equity or in law, and in particular arising from tax preparation services performed by SLK Financial Services, LLC., unless arising from any willful, intentional, or negligent act or omission on the part of SLK Financial Services, LLC.

I agree to pay SLK Financial Services, LLC for services rendered immediately upon completion of work. I further understand that my tax return will not be released prior to full payment to SLK Financial Services, LLC. I authorize SLK Financial Services, LLC to seek any means necessary in accordance with the laws of the State of Georgia to pursue a past due balance on my account.

This release shall remain binding upon all successors in interest and personal representatives of the contracting parties, to the extent permitted by law.

Signed this ____ day of _____, 20__

Client's Name

Client's Signature

Client's Name

Client's Signature

In the presence of: _____

Witness/Preparer