



**P. O. Box 4662  
Mooreville, NC 28117-4662  
(704) 799-3058 Phone  
(704) 799-3059 Fax**

## **CONSENT TO REFER YOUR CONTACT INFORMATION**

Federal law requires this consent form be provided to you. Unless authorized by law, we cannot use, without your consent, your tax return information (or any part of your information) for purposes other than the preparation and filing of your tax return.

You are not required to complete this form. If we obtain your signature on this form by conditioning our services on your consent, your consent will not be valid. Your consent is valid for amount of time that you specify. If you do not specify the duration of your consent, your consent is valid for one year.

For your convenience, we at Payroll, Inc. have entered into an arrangement with The Other Insurance Agency, LLC regarding the provision of personal contact information. This will allow The Other Insurance Agency, LLC to contact you personally to ask permission to quote insurance coverage for you and your family and/or your business.

Payroll, Inc. is also required by law to disclose the association it has with The Other Insurance Agency, LLC. We are informing you that Gwen B. Moore is the shareholder/owner of both businesses.

If you would like The Other Insurance agency to contact you for this purpose, please sign and date this consent. If you are not interested, please do not sign.

Signature: \_\_\_\_\_ Print Your Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Print Your Name: \_\_\_\_\_

Date: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Best Time to reach you: \_\_\_\_\_

Insurance You Are Interested In  
Obtaining \_\_\_\_\_