

**AUTHORIZATION FOR  
ELECTRONIC TRANSMISSION OF DATA**

CALIFORNIA DEPARTMENT OF TAX AND FEE ADMINISTRATION

NAME OF TAXPAYER(S) OR FEEPAYER(S)	TAXPAYER'S/FEEPAYER'S EMAIL ADDRESS
TAXPAYER'S/FEEPAYER'S ACCOUNT NO.	CASE IDENTIFICATION NUMBER <i>(if applicable)</i>
TAXPAYER'S/FEEPAYER'S REPRESENTATIVE	TAXPAYER'S/FEEPAYER'S REPRESENTATIVE'S EMAIL ADDRESS

The California Department of Tax and Fee Administration (CDTFA) collects and stores confidential information about taxpayers and fee payers and has a responsibility under the law to protect this information from unauthorized access, use, and disclosure. Taxpayers or fee payers may authorize the transmission of confidential information via email by providing written authorization to the CDTFA. If authorization is provided, the confidential information will only be sent to individuals who have a legitimate business need to view the information (taxpayer or fee payer, and/or representative).

The following statement will be included on each transmission:

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**By signing, you acknowledge the following statement with respect to the account noted above:**

*I authorize the transmission of confidential or sensitive information via email. I understand that transmission via email is not a secure transmission and the CDTFA is not responsible if confidential or sensitive information sent via email is accessed by third parties.*

SIGNED BY* <i>(taxpayer, fee payer, corporate officer or representative with a power of attorney)</i>	DATE SIGNED
PRINT NAME OF SIGNATORY	CONTACT PERSON <i>(if other than signatory)</i>
TITLE OR POSITION	TELEPHONE NUMBER (    )
TITLE OR POSITION OF CONTACT PERSON	TELEPHONE NUMBER (    )

*\*Signatory, if not a corporate officer, partner or owner, certifies under penalty of perjury that he or she holds a power of attorney to execute this document.*