

Names and address of taxpayers <i>(Number, street, city or town, State, ZIP code)</i> TAXPAYER NAME STREET ADDRESS CITY, STATE ZIP	Social security or employer identification number XXX-XX-XXXX
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Increase (Decrease) in Tax and Penalties

Tax year ended	Tax	Penalties			
		Delq - IRC6651(a)(2)	Delq - IRC6651(f)	Est Tax-IRC 6654	
201312	\$47,726.00	\$11,931.50	\$34,601.35	\$ 852.65	
201412	\$33,045.00	\$ 8,261.25	\$23,957.63	\$ 592.29	
201512	\$23,406.00	\$ 5,149.32	\$16,969.35	\$ 421.54	

(For instructions, see back of form)

Consent to Assessment and Collection

I consent to the immediate assessment and collection of any deficiencies *(increase in tax and penalties)* and accept any overassessment *(decrease in tax and penalties)* shown above, plus any interest provided by law. I understand that by signing this waiver, I will not be able to contest these years in the United States Tax Court, unless additional deficiencies are determined for these years.

YOUR SIGNATURE HERE →		Date
SPOUSE'S SIGNATURE →		Date
TAXPAYER'S REPRESENTATIVE HERE →		Date
CORPORATE NAME →		
CORPORATE OFFICER(S)	Title	Date
SIGN HERE →	Title	Date