PPS LLC

Preferred Electronic Refund Check (or Transfer) and Filing Agreement

Taxpayer Information

Primary Name:	Name: Social Sec. Num.:				
Spouse Name:		Social Sec. Num.:			
Home Address: (continued i.c.o.)		Apartment Number:			
Home Address: (number & street)					
City:	State:	Zip Code:			
Phone number where you can be reach Daytime Phone: (Fee Summary/Refund)	Evening Phone: ()	-		
Preparation: \$	Filing: \$	PERC/PERT:	\$		
Other: \$		Anticipated Refund:	\$		
		Total Fees/Taxes:	\$		
		NET Check/Transfer:	\$		
Payment Choice:	Check (PERC)	(initials of primary) Electronic Transfer (PERT) in	(initials of spouse) ato existing account		
Required ONLY if Electronic	Transfer is selected Bank	Name:			
Bank Routing Transit Number (RTN):_	Acc	ount Number:			
	Account Type:	Checking Savings			
I/We here by request and authorize that my/our PERT proceeds be direct deposited (less fees outlined in this PERC/PERT agreement), into my/our existing account (above). PERTs occasionally require one or more extra business days. I/We have read this agreement and agree to its terms and conditions.					
X (initials of primary)	X (initials of spo	ouse)			

Consent and Authorization

I/We hereby authorize the undersigned Electronic Return Originator (ERO) to electronically file my/our _______ Federal Income Tax Return with the Internal Revenue Service (IRS) (and/or if applicable, our state tax return with the state taxing agency). I/We have executed this agreement in order to participate in the IRS/state filing program(s) in which I/we may have a refund(s), stimulus payment(s) or other similar payment(s) directly deposited to my/our checking account. By execution of this agreement, I/we hereby direct First National Bank of Central Texas (FNBCT) in Waco, Texas to direct my/our tax refund(s), stimulus payment(s) or other similar payment(s) to a special use deposit account which will be used for the purpose of receiving by direct deposit any tax refund, stimulus payment(s) or other similar payment(s) due me/us by the IRS or State. Upon receipt of any such fund(s), I/we authorize Preferred Processing Solutions LLC (PPS LLC) of Waco, Texas to deduct and disperse fees due to the ERO, PPS LLC, FNBCT and any other fees agreed upon in this agreement. A fee of \$8.00 per additional disbursement applies after the first disbursement is provided. After all fees have been deducted, the remainder of the balance shall be payable to me/us in the form of a check which shall be receivable at the location of the ERO or shall be deposited to my existing bank account as selected above. I/We authorize my/our Electronic Return Originator/Electronic Return Transmitter/Independent Tax Preparer as my/our agent in connection with the completion and transmission of this application.

Math Errors, Permission to Correct, and Correction Fees

I/We hereby request and authorize that you correct any math error on my tax return. I/we acknowledge that such correction may change my/our tax liability and/or refund amount and delay processing my/our tax return. If the error is greater than \$25 on

my/our income or \$5 on my/our refund, I/we will be required processed until this form is received at the processing center. The necessary or a fee of if it can be corrected by telephone	nere is an additional charge of _	
Other Correction Fees Other fees may apply as follows: \$29.00 - stop payment of check Fund Transfer, \$13.00 - re-processing with conversion of check different payment type). I/we hereby authorize PPS LLC to dec	to EFT or EFT to check (if init	tial processing occurred with a
Consumer Protection - Authorization To increase the safety of my/our refund, I/we authorize PPS I or State etc. (for safekeeping and later distribution to me/us) if needed to protect my/our funds.		
Disclosures I/We understand that neither PPS LLC, the tax preparer/ERO refund or the date that it will be deposited. I/we further under my/our refund at all. And if so, I/we will be billed fees shown understand that the tax preparer/ERO location are independent not have the authority to act on behalf of PPS LLC or FNBCT. not offer tax advise. I/We understand that this PERC/PERT fee(s) associated with it is interest. I understand that it is pohave the IRS/State deposit their refunds into their existing accepter PERC/PERT fees. I understand that this PERC/PERT was made and that PERCs/PERT shormally provides checks or transfer.	stand that the IRS and/or state in this agreement and will pay nt contractors and are not agent. I/We understand that PPS LL T is NOT a RAL and NOT a essible and prudent for taxpayer ounts and to pay preparation fe made available to allow me to av	e may choose not to deposit the same immediately. I/We s of PPS LLC and FNBCT and do C and FNBCT have not and do Loan and that no part(s) of the es to file their taxes directly and to es in advance to avoid paying roid the high fees associated with
Limited Liability Neither PPS LLC, this location, nor FNBCT is responsible for PPS LLC and FNBCT is limited to the fees charged to the locat location, and FNBCT are not responsible for lost, damaged, or best efforts to process your returns in a timely manner. Howev returns these include but are not limited to loss of returns, dam malfunctions, weather conditions, and changes in Internal Revo	ion by PPS LLC for service for yestolen returns. PPS LLC, this ler, events beyond their control paged or destroyed returns, power than the control paged or destroyed returns.	your account. PPS LLC, this ocation, and FNBCT will use their may delay or prevent processing wer failures, computer
Governing Law This Agreement shall be governed by and construed in accordar required in connection with this Agreement, such litigation sha of Texas, located in McLennan County, Texas. If any provision remain in effect.	ll be commenced and maintain	ed in a District Court for the State
I/We have read this agreement and agree to	its terms and condition	ns.
Y Primary Taxpayer Signature (Date)	X Spouse Signature	(Date)
	Spouse signature	(Date)
OR		
I/We have read this agreement and agree to a I hereby authorize my spouse to pick up my/		
Thereby authorize my spouse to pick up my/	-	Denam.
X Primary Taxpayer Signature (Date)	X Spouse Signature	(Date)

CONSENT TO DISCLOSURE OF TAX RETURN INFORMATION

Federal law requires this consent form be provided to you. Unless authorized by law, we cannot disclose, without your consent, your tax return information to third parties for purposes other than the preparation and filing of your tax return. If you consent to the disclosure of your tax return information, Federal law may not protect your tax return information from further use or distribution. 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. If you agree to the disclosure of your tax return information, your consent is valid for the amount of time that you specify. If you do not specify the duration of your consent, your consent is valid for one year.

You have indicated that you are interested in obtaining a Preferred Electronic Refund Check (PERC) or Preferred Electronic Refund Transfer (PERT). To provide you with this information, the ERO, J & E Service Enterprises, must forward your tax return information, as indicated below, to the processor that provides this service.

If you would like the ERO to disclose your tax return information to the processor providing this service, please provide the information requested below and sign and date your consent to the disclosure of your tax return information.

I, Primary Name (print)			(and)	
Spouse Name (print)			1	
authorize the ERO to disclose to Prefetax year that is necessary for contact me if necessary regarding IRS/pertaining to that processing.	Preferred Pro	ocessing Solutions LLC to proce	ess my PERC or PERT as	nd to
X Primary Taxpayer Signature	(Date)	X Spouse Signature	(Date)	

If you believe your tax return information has been disclosed or used improperly in a manner unauthorized by law or without your permission, you may contact the Treasury Inspector General for Tax Administration (TIGTA) by telephone at 1-800-366-4484, or by email at complaints@tigta.treas.gov.