

**SUPERIOR COURT OF THE DISTRICT OF COLUMBIA
COMMITTEE ON THE SELECTION AND TENURE OF MAGISTRATE JUDGES**

**PRIOR TO COMPLETING THIS FORM, PLEASE BE SURE YOU HAVE
REVIEWED THE TERMS OF THIS AGREEMENT.**

By providing the information herein and by signing this waiver, I voluntarily authorize the **State of Maryland** to release the tax return and return information indicated below. The return information will be used concerning my appointment or employment by the Superior Court of the District of Columbia. This waiver is made pursuant to 26 U.S.C. 6103 (c), which permits the release of return and return information, which would otherwise be confidential, to my designee.

I designate that the **Office of the Comptroller of the State of Maryland** release return and return information to:

Judge Michael O'Keefe, Co-Chair, Committee on the Selection and Tenure of Magistrate Judges

The information I am consenting to release is:

1. Have I failed to file a Maryland income tax return for any of the last three (3) years for which filing of a return might have been required? If the filing date for the most recent required return has not yet lapsed on the date the State of Maryland receives this waiver and my records do not indicate a return filing for the most recent required return, the "last three years" will mean the three years preceding the year for which returns are currently being filed and processed.
2. Were any of the returns in #1 filed more than forty-five (45) days after the due date for filing, determined with regard to any extension(s) of time for filing?
3. Have I failed to pay any tax, penalty, or interest liability during the current or last three calendar years within forty-five (45) days of the date which the State of Maryland gave notice of the amount due and request for payment?
4. Am I now or have I ever been under investigation by the Office of the Comptroller of Maryland for possible criminal offenses?
5. Has any civil penalty for fraud been assessed against me during the current or last three (3) calendar years?

If the information which is to be released, includes a "Yes" answer to any of the above five (5) questions, I authorize the Office of the Comptroller of Maryland to release any information pertaining to that question.

THE APPLICANT MUST SIGN AND DATE PAGE TWO (2) OF THIS FORM.

To help the **Office of the Comptroller of the State of Maryland** find any tax records, I am voluntarily providing the following information:

TAX PAYER INFORMATION:

Full Legal Name	
Social Security Number	
Current Home Address	
Home Telephone Number	
Office Telephone Number	
Cellular Telephone Number	

IF MARRIED AND FILED A JOINT RETURN:

Name of Spouse	
Spouse's Social Security Number	

NAMES AND ADDRESSES SHOWN ON LAST THREE RETURNS (IF DIFFERENT FROM ABOVE):

Year	Name(s)	Address

If a return for any of the last three (3) years was not filed, please explain why.

DATE: _____

*WAIVER INVALID UNLESS THE DATE IS
HAND-WRITTEN BY TAXPAYER AND RECEIVED BY
THE STATE OF MARYLAND WITHIN 120 DAYS OF THIS DATE*

*SIGNATURE OF THE TAXPAYER AUTHORIZING THE
DISCLOSURE OF RETURN/RETURN INFORMATION*