



Hannans360 is a CPA Practice



Tax Agent  
24742245

## Authority to Act

By completing this form you are giving Hannans360 the authority to provide and receive information regarding your financial and accounting matters to the nominated person.

This authority will remain in place until you withdraw your consent by way of writing to Hannans360.

### Personal details

Your full name	
Today's date	
<b>Nominated person</b>	
Full name	
Email	
Phone	
Other	

### Entities

I give the nominated person authority to act on my behalf regarding (select 1 option):

- All my personal and business entities
- Specified entities (please provide details below)

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### Authority

Name	
Date	
Signature	



Phone.

+617 3806 4484



Email.

admin@hannans360.com.au



Address.

PO Box 5128 Daisy Hill QLD 4127