



**UTAH STATE TAX COMMISSION
REQUEST FOR DISTRIBUTION OF SALES TAX REPORTS**

Name of town, city, or
county employee: _____

Title: _____

Phone Number: _____

EMAIL: _____

Government Entity: _____

Address: _____

I certify that I am an employee of _____ (town, city, or county) authorized to request the Tax Commission to provide reports of seller sales, sales and use tax distribution reports, and a breakdown of local revenues to the agent or representative of _____ (town, city, or county) named below.

I understand that the sales tax information described above is confidential under Section 59-1-403, and the disclosure of this information is prohibited except as provided in Section 59-12-210. I further understand that release of sales and use tax information by a county or municipality except as provided in statute is an unauthorized disclosure of confidential information and will result in the penalties outlined in Utah Code 59-1-403(5), and that the agent or representative named below is also subject to these prohibitions and penalties. In addition, I certify that I have informed the agent or representative named below of these statutory prohibitions and penalties.

Name of Agent or
Representative: _____

Title: _____

Phone Number: _____

EMAIL: _____

Address: _____

Signature of Town, County, or City Employee

Date

Return this form to: Financial Services – Distribution
 Utah State Tax Commission
 210 N 1950 W
 Salt Lake City, UT 84134-1200

Or fax to 801-297-3899