

SAMPLE - Disaster Declaration

Lacorte
65.2Form **2848**

(Rev. January 2021)

Department of the Treasury
Internal Revenue Service**Power of Attorney
and Declaration of Representative**► Go to www.irs.gov/Form2848 for instructions and the latest information.

OMB No. 1545-0150

For IRS Use Only

Received by:

Name _____

Telephone _____

Function _____

Date 1 / 1 / _____**Part I Power of Attorney****Caution:** A separate Form 2848 must be completed for each taxpayer. Form 2848 will not be honored for any purpose other than representation before the IRS.**1 Taxpayer information.** Taxpayer must sign and date this form on page 2, line 7.

Taxpayer name and address

Taxpayer identification number(s)

Daytime telephone number

Plan number (if applicable)

PETER C MCCARTY
10008 ENCINO AVENUE
NORTHRIDGE, CA 91325

hereby appoints the following representative(s) as attorney(s)-in-fact:

2 Representative(s) must sign and date this form on page 2, Part II.

Name and address

SUSAN K AKI-SANFORD
4400 W RIVERSIDE DR #110-171
BURBANK, CA 91505Check if to be sent copies of notices and communications ☐CAF No. 9005-62586RPTIN P00059321Telephone No. (818) 846-1619

Fax No. _____

Check if new: Address ☐ Telephone No. ☐ Fax No. ☐

Name and address

JUSTIN R SANFORD
4400 W RIVERSIDE DR #110-171
BURBANK, CA 91505Check if to be sent copies of notices and communications ☒CAF No. 0314-38751RPTIN P02081291Telephone No. (818) 846-1619

Fax No. _____

Check if new: Address ☐ Telephone No. ☐ Fax No. ☐

Name and address

(Note: IRS sends notices and communications to only two representatives.)

Name and address

(Note: IRS sends notices and communications to only two representatives.)

to represent the taxpayer before the Internal Revenue Service and perform the following acts:

- 3 Acts authorized (you are required to complete line 3).**
- Except for the acts described in line 5b, I authorize my representative(s) to receive and inspect my confidential tax information and to perform acts I can perform with respect to the tax matters described below. For example, my representative(s) shall have the authority to sign any agreements, consents, or similar documents (see instructions for line 5a for authorizing a representative to sign a return).

Description of Matter (Income, Employment, Payroll, Excise, Estate, Gift, Whistleblower, Practitioner Discipline, PLR, FOIA, Civil Penalty, Sec. 4980H Shared Responsibility Payment, etc.) (see instructions)	Tax Form Number (1040, 941, 720, etc.) (if applicable)	Year(s) or Period(s) (if applicable) (see instructions)
INCOME	1040	2023 , 2024

- 4 Specific use not recorded on the Centralized Authorization File (CAF).**
- If the power of attorney is for a specific use not recorded on CAF, check this box. See Line 4. Specific Use Not Recorded on CAF in the instructions.
- ☐

- 5a Additional acts authorized.**
- In addition to the acts listed on line 3 above, I authorize my representative(s) to perform the following acts (see instructions for line 5a for more information):
- ☐
- Access my IRS records via an Intermediate Service Provider;

☐ Authorize disclosure to third parties; ☐ Substitute or add representative(s); ☐ Sign a return; _____☐ Other acts authorized: _____