Form 2848 (Rev. 1	-2021)				Page <b>2</b>	
payme	<b>Specific acts not authorized.</b> My representative(s) is (are) not authorized to endorse or otherwise negotiate any check (including directing or accepting payment by any means, electronic or otherwise, into an account owned or controlled by the representative(s) or any firm or other entity with whom the representative(s) is (are) associated) issued by the government in respect of a federal tax liability. List any other specific deletions to the acts otherwise authorized in this power of attorney (see instructions for line 5b):					
with th attorn	ne Internal Revenue Service ey, check here		r periods covered by thi	omatically revokes all earlier power(s) of at s form. If you <b>do not</b> want to revoke a p	-	
7 Taxpa even it (or des	yer declaration and signat they are appointing the sa	<b>ure.</b> If a tax matter concerns a year me representative(s). If signed by a able), executor, receiver, administra	in which a joint return w a corporate officer, partne	an filed, each spouse must file a separate er, guardian, tax matters partner, partners al other than the taxpayer, I certify I have	ship representative	
► IF N	OT COMPLETED, SIGNE	D, AND DATED, THE IRS WILL F	RETURN THIS POWER	OF ATTORNEY TO THE TAXPAYER.		
Emilia (v	raslein	3/2	2/2024			
Emily (r	Signature		Date	Title (if applicable)		
	Jighatare		Dute			
Emily Cr	osley					
_	Print name		Print name of	taxpayer from line 1 if other than individua	al	
Part II	Declaration of Repre	sentative				
Under penaltie	s of perjury, by my signature	e below I declare that:				
<ul> <li>I am not curre</li> </ul>	ntly suspended or disbarred	from practice, or ineligible for practice	tice, before the Internal F	Revenue Service;		
-	-			before the Internal Revenue Service;		
<ul> <li>I am authorize</li> </ul>	d to represent the taxpayer	identified in Part I for the matter(s)	specified there; and			
<ul> <li>I am one of th</li> </ul>	e following:					
<b>a</b> Attorney—	a member in good standing	g of the bar of the highest court of t	the jurisdiction shown be	low.		
				int in the jurisdiction shown below.		
c Enrolled A	gent—enrolled as an agent	by the IRS per the requirements of (	Circular 230.			
<b>d</b> Officer—a	bona fide officer of the taxp	ayer organization.				
<b>e</b> Full-Time I	Employee—a full-time employee	oyee of the taxpayer.				
f Family Mer	nber—a member of the taxpa	ayer's immediate family (spouse, pare	ent, child, grandparent, gra	andchild, step-parent, step-child, brother, or	sister).	
-	ctuary—enrolled as an actua section 10.3(d) of Circular 2		ment of Actuaries under	29 U.S.C. 1242 (the authority to practice be	efore the IRS is	
and signed a valid PTI	d the return or claim for refu N; and (4) possesses the req	ind (or prepared if there is no signat	ure space on the form); (	preparer may represent, provided the prep 2) was eligible to sign the return or claim f ). See Special Rules and Requirements for	for refund; (3) has	
		receives permission to represent ta LITC or STCP. See instructions for Pa		virtue of his/her status as a law, business, nation and requirements.	or accounting	
	etirement Plan Agent—enro service is limited by section a	1 0	ler the requirements of C	ircular 230 (the authority to practice befor	e the Internal	
		PRESENTATIVE IS NOT COM MUST SIGN IN THE ORDER LIS		D DATED, THE IRS WILL RETURN T	HE POWER OF	
Note: For desig	nations d-f, enter your title,	position, or relationship to the tax	payer in the "Licensing ju	risdiction" column.		
Designation Insert above le ( <b>a-r).</b>	(State) or other	Bar, license, certification, registration, or enrollment number (if applicable)		Signature	Date	

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