Power of Attorney and Declaration of Representative

OMB No. 1545-0150 For IRS Use Only Received by:

Internal Revenue Service Go to www.irs.gov/Form2848 for i	nstructions and the latest information.	Name		
Part I Power of Attorney	Telephone			
Caution: A separate Form 2848 must be completed for e		Function		
for any purpose other than representation before the IRS.	Date / /			
Taxpayer information. Taxpayer must sign and date this form on				
Taxpayer name and address Beverly Jerdine	Taxpayer identification number(s)	62-8928		
16810 Carlisle Street				
Detroit, MI 48205	Daytime telephone number Plan r	number (if applicable)		
hereby appoints the following representative(s) as attomey(s)-in-fact:				
2 Representative(s) must sign and date this form on page 2, Part II.				
Name and address	CAF No. 0315-54449R			
David W Collins	PTIN P03013529			
9301 Ocoee St., #64	Telephone No(423) 482-9737			
Ooltewah, TN 37363	Fax No. (423) 558-3274			
Check if to be sent copies of notices and communications	Check if new: Address Telephone No.	Fax No.		
Name and address	CAF No.			
	PTIN			
	Telephone No.			
	Fax No.			
Check if to be sent copies of notices and communications	Check if new: Address Telephone No.	Fax No.		
Name and address	CAF No.			
	PTIN			
	Telephone No.			
	Fax No.	······		
(Note: IRS sends notices and communications to only two representatives.)	Check if new: Address Telephone No.			
Name and address	CAF No.			
	PTIN			
	Telephone No. Fax No.			
(Note: IRS sends notices and communications to only two representatives.)				
to represent the taxpayer before the Internal Revenue Service and perform		, rax 110.		
3 Acts authorized (you are required to complete line 3). Except fo inspect my confidential tax information and to perform acts I can representative(s) shall have the authority to sign any agreements, representative to sign a return).	r the acts described in line 5b, I authorize my repres perform with respect to the tax matters described	below. For example, m		
Description of Matter (Income, Employment, Payroll, Excise, Estate, Gift, Whistleblower, Practitioner Discipline, PLR, FOIA, Civil Penalty, Sec. 4980H Shared Responsibility Payment, etc.) (see instructions)		r Period(s) (if applicable) see instructions)		
Income, SRP	1040	2000 - 2027		
Separate Assessments	1040	2000 - 2027		
Civil Penalties	N/A	2000 - 2027		
4 Specific use not recorded on the Centralized Authorization Fi CAF, check this box. See <i>Line 4</i> . Specific Use Not Recorded on C		_		
5a Additional acts authorized. In addition to the acts listed on line 3 instructions for line 5a for more information): ☐ Access my IRS re ☐ Authorize disclosure to third parties; ☐ Substitute or add	ecords via an Intermediate Service Provider;	he following acts (see		

Other acts authorized:

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b	payment by any means, electronic or otherwise, in	nto an account owned or controlled by the rep	se negotiate any check (including directing or accepting resentative(s) or any firm or other entity with whom the	
	representative(s) is (are) associated) issued by the			
	List any other specific deletions to the acts otherw	vise authorized in this power of attorney (see in	structions for line 5b):	
6		matters and years or periods covered by this		
7	even if they are appointing the same representat	tive(s). If signed by a corporate officer, partner, receiver, administrator, trustee, or individual	is filed, each spouse must file a separate power of attorney, guardian, tax matters partner, partnership representative other than the taxpayer, I certify I have the legal authority	
P	awerly Jerdine	2/26/2024		
	Signature	Date	Title (if applicable)	
Bev	erly Jerdine			
Print name		Print name of ta	Print name of taxpayer from line 1 if other than individual	
Part	II Declaration of Representative			
Under	penalties of perjury, by my signature below I declar	e that:		
l am r	not currently suspended or disbarred from practice,	or ineligible for practice, before the Internal Re	venue Service;	
l am s	ubject to regulations in Circular 230 (31 CFR, Subtitle	A, Part 10), as amended, governing practice be	fore the Internal Revenue Service;	
l am a	uthorized to represent the taxpayer identified in Pa	rt I for the matter(s) specified there; and		
l am c	one of the following:			
a At	torney—a member in good standing of the bar of the	ne highest court of the jurisdiction shown below	w.	
b Ce	ertified Public Accountant—a holder of an active lice	ense to practice as a certified public accountant	in the jurisdiction shown below.	

- c Enrolled Agent—enrolled as an agent by the IRS per the requirements of Circular 230.
 d Officer—a bona fide officer of the taxpayer organization.
- e Full-Time Employee—a full-time employee of the taxpayer.
- f Family Member—a member of the taxpayer's immediate family (spouse, parent, child, grandparent, grandchild, step-parent, step-child, brother, or sister).
- g Enrolled Actuary—enrolled as an actuary by the Joint Board for the Enrollment of Actuaries under 29 U.S.C. 1242 (the authority to practice before the IRS is limited by section 10.3(d) of Circular 230).
- h Unenrolled Return Preparer—Authority to practice before the IRS is limited. An unenrolled return preparer may represent, provided the preparer (1) prepared and signed the return or claim for refund (or prepared if there is no signature space on the form); (2) was eligible to sign the return or claim for refund; (3) has a valid PTIN; and (4) possesses the required Annual Filing Season Program Record of Completion(s). See Special Rules and Requirements for Unenrolled Return Preparers in the instructions for additional information.
- k Qualifying Student or Law Graduate—receives permission to represent taxpayers before the IRS by virtue of his/her status as a law, business, or accounting student, or law graduate working in a LITC or STCP. See instructions for Part II for additional information and requirements.
- r Enrolled Retirement Plan Agent—enrolled as a retirement plan agent under the requirements of Circular 230 (the authority to practice before the Internal Revenue Service is limited by section 10.3(e)).
 - FIF THIS DECLARATION OF REPRESENTATIVE IS NOT COMPLETED, SIGNED, AND DATED, THE IRS WILL RETURN THE POWER OF ATTORNEY. REPRESENTATIVES MUST SIGN IN THE ORDER LISTED IN PART I, LINE 2.

Note: For designations d-f, enter your title, position, or relationship to the taxpayer in the "Licensing jurisdiction" column.

Designation— Insert above letter (α-r).	Licensing jurisdiction (State) or other licensing authority (if applicable)	Bar, license, certification, registration, or enrollment number (if applicable)	Signature	Date
С	Federal (IRS)	00150946-EA	pa.	02/29/2024