Form 2848 (Rev. 1-2021)

b	<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		•		
		rwise authorized in this power of attorney (see in			
6	with the Internal Revenue Service for the same attorney, check here		natically revokes all earlier power(s) of attorney on file form. If you <b>do not</b> want to revoke a prior power of		
7	even if they are appointing the same represent	ative(s). If signed by a corporate officer, partner or, receiver, administrator, trustee, or individual	s filed, each spouse must file a separate power of attorney or guardian, tax matters partner, partnership representative other than the taxpayer, I certify I have the legal authority FATTORNEY TO THE TAXPAYER.		
(La	ude Reese	2/26/2024			
	Signature	Date	Title (if applicable)		
сlа	ude Reese				
	Print name		expayer from line 1 if other than individual		
Part	II Declaration of Representative				
Under	penalties of perjury, by my signature below I decl	are that:			
•I am n	ot currently suspended or disbarred from practice	e, or ineligible for practice, before the Internal Re	evenue Service;		
• I am sı	ubject to regulations in Circular 230 (31 CFR, Subti	tle A, Part 10), as amended, governing practice be	efore the Internal Revenue Service;		
• I am a	uthorized to represent the taxpayer identified in	Part I for the matter(s) specified there; and			
• I am o	ne of the following:				
<b>a</b> At	torney—a member in good standing of the bar of	the highest court of the jurisdiction shown belo	w.		
<b>b</b> Ce	ertified Public Accountant—a holder of an active l	icense to practice as a certified public accountan	t in the jurisdiction shown below.		
<b>c</b> En	rolled Agent—enrolled as an agent by the IRS per	the requirements of Circular 230.			
<b>d</b> Of	ficer—a bona fide officer of the taxpayer organiza	ation.			
<b>e</b> Fu	II-Time Employee—a full-time employee of the ta	xpayer.			
<b>f</b> Fa	mily Member—a member of the taxpayer's immedia	te family (spouse, parent, child, grandparent, gran	dchild, step-parent, step-child, brother, or sister).		
<b>g</b> En	rolled Actuary—enrolled as an actuary by the Join	nt Board for the Enrollment of Actuaries under 2	9 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)).
- IF 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 ( <b>α-r</b> ).	Licensing jurisdiction (State) or other licensing authority (if applicable)	Bar, license, certification, registration, or enrollment number (if applicable)	Signature	Date