(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					

Part I **Power of Attorney** Caution: A separate Form 2848 must be completed for each taxpayer. Form 2848 will not be honored Function for any purpose other than representation before the IRS. Date Taxpayer information. Taxpayer must sign and date this form on page 2, line 7. Charles Lowder Taxpayer identification number(s) 5539 Bergamont Ln 359-36-0039 Naperville, IL 60564 Daytime telephone number Plan number (if applicable) hereby appoints the following representative(s) as attorney(s)-in-fact: Representative(s) must sign and date this form on page 2, Part II. **David Collins** CAF No. **0315-54449R** 9301 Ocoee St #64 PTIN **P03013529** Chattanooga, TN 37363 Telephone No. **423-482-9737** Check if new: Address Telephone No. Check if to be sent copies of notices and communications $\overline{\mathbf{v}}$ Telephone No. Fax No. $\overline{\mathbf{v}}$ Check if to be sent copies of notices and communications Check if new: Address ____ Telephone No. 🔲 CAF No. Telephone No. Fax No. (Note: IRS sends notices and communications to only two representatives.) Check if new: Address Telephone No. 🗌 CAF No. PTIN _____ Telephone No. Fax No. (Note: IRS sends notices and communications to only two representatives.) Check if new: Address Telephone No. 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, Tax Form Number Year(s) or Period(s) (if applicable) Whistleblower, Practitioner Discipline, PLR, FOIA, Civil Penalty, Sec. 4980H (1040, 941, 720, etc.) (if applicable) (see instructions) Shared Responsibility Payment, etc.) (see instructions) Income / Separate Assessment 1040 (MFT 30) / 1040 (MFT 31) 2000 through 2026 2000 through 2026 **Civil Penalty** N/A 1st,2nd,3rd,4th Qtrs. **Shared Responsibility Payments** MFT 35 2013 through 2026 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 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; Substitute or add representative(s); Sign a return; Authorize disclosure to third parties; Other acts authorized:

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b	payment by any means, electronic or otherwise, into a representative(s) is (are) associated) issued by the government of the second control of the second	n account owned or controlled by the re ernment in respect of a federal tax liabili				
	List any other specific deletions to the acts otherwise a	List any other specific deletions to the acts otherwise authorized in this power of attorney (see instructions for line 5b):				
6		ers and years or periods covered by thi	omatically revokes all earlier power(s) of attorney on file s form. If you do not want to revoke a prior power of			
7	even if they are appointing the same representative(s). If signed by a corporate officer, partne siver, administrator, trustee, or individua	vas filed, each spouse must file a separate power of attorne er, guardian, tax matters partner, partnership representativ Il other than the taxpayer, I certify I have the legal authorit OF ATTORNEY TO THE TAXPAYER.			
	Charles Lowder	11/02/2024				
	Signature	Date	Title (if applicable)			
	Charles Lowder					
	Print name	Print name of t	taxpayer from line 1 if other than individual			
Part	Declaration of Representative					
Under	penalties of perjury, by my signature below I declare that	at:				
l am r	not currently suspended or disbarred from practice, or in	eligible for practice, before the Internal F	Revenue Service;			
I am s	ubject to regulations in Circular 230 (31 CFR, Subtitle A, P	art 10), as amended, governing practice	before the Internal Revenue Service;			
I am a	uthorized to represent the taxpayer identified in Part I fo	or the matter(s) specified there; and				
I am c	one of the following:					
a At	torney—a member in good standing of the bar of the hi	ghest court of the jurisdiction shown be	low.			
b Ce	ertified Public Accountant—a holder of an active license	to practice as a certified public accounta	int in the jurisdiction shown below.			
c En	rolled Agent—enrolled as an agent by the IRS per the re	quirements of Circular 230.				
d Of	fficer—a bona fide officer of the taxpayer organization.					
e Fu	ıll-Time Employee—a full-time employee of the taxpaye	r.				
f Fa	mily Member—a member of the taxpayer's immediate fam	illy (spouse, parent, child, grandparent, gra	ındchild, step-parent, step-child, brother, or sister).			
-	prolled Actuary—enrolled as an actuary by the Joint Boan mited by section 10.3(d) of Circular 230).	rd for the Enrollment of Actuaries under	29 U.S.C. 1242 (the authority to practice before the IRS is			
ar a	nd signed the return or claim for refund (or prepared if th	nere is no signature space on the form); (Season Program Record of Completion(s	oreparer may represent, provided the preparer (1) prepared 2) was eligible to sign the return or claim for refund; (3) has). See Special Rules and Requirements for Unenrolled			

- 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.

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

Designation— Insert above letter (a-r).	sert above letter (State) or other registration, or enrollment		Signature	Date
c	IRS	00150946-EA		11/04/2024