Form 2848 (Rev. 1-20	21)				Page 2	
payment	Specific acts not authorized. 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 o	her specific deletions to the acts otherwise authorized in this power of attorney (see instructions for line 5b):					
with the attorney,	 6 Retention/revocation of prior power(s) of attorney. The filing of this power of attorney automatically revokes all earlier power(s) of attorney on file with the Internal Revenue Service for the same matters and years or periods covered by this form. If you do not want to revoke a prior power of attorney, check here YOU MUST ATTACH A COPY OF ANY POWER OF ATTORNEY YOU WANT TO REMAIN IN EFFECT. 					
7 Taxpayer even if th (or design	declaration and signate ey are appointing the sa	Jre. If a tax matter concerns a year me representative(s). If signed by a able), executor, receiver, administra	in which a joint return wa a corporate officer, partne	as filed, each spouse must file a separate p er, guardian, tax matters partner, partners I other than the taxpayer, I certify I have f	hip representative	
► IF NOT	COMPLETED, SIGNE	D, AND DATED, THE IRS WILL R	ETURN THIS POWER O	OF ATTORNEY TO THE TAXPAYER.		
lin la Ma	inda Marie Sparge signature		3/20/2024			
(inda mai	Signature	·····	Date	Title (if applicable)		
Linda Mari	e Spargo Print name		Print name of t	axpayer from line 1 if other than individua	·	
Part II De	claration of Repre	sentative		axpayer from line 1 if other than individua	11	
	_					
-	f perjury, by my signature		tica bafara tha Intornal R			
	-	from practice, or ineligible for prac		before the Internal Revenue Service;		
		identified in Part I for the matter(s)		before the internal Revenue Service,		
• I am one of the fo			specified there, and			
	-	of the bar of the highest court of t	ha jurisdiction shown hal	014		
-		-	-	nt in the jurisdiction shown below.		
		by the IRS per the requirements of (in the jurisdiction shown below.		
_	-					
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). 						
-				29 U.S.C. 1242 (the authority to practice be	-	
limited by see	ction 10.3(d) of Circular 2	30).				
and signed th a valid PTIN; a	ne return or claim for refu and (4) possesses the requ	nd (or prepared if there is no signat	ure space on the form); (2	preparer may represent, provided the prep 2) was eligible to sign the return or claim fo . See Special Rules and Requirements fo	or refund; (3) has	
		eceives permission to represent ta LITC or STCP. See instructions for Pa		virtue of his/her status as a law, business, ation and requirements.	or accounting	
	ement Plan Agent—enro ice is limited by section 1		er the requirements of Ci	rcular 230 (the authority to practice before	e the Internal	
► IF THIS [DECLARATION OF RE	PRESENTATIVE IS NOT COM		D DATED, THE IRS WILL RETURN TH	HE POWER OF	
		MUST SIGN IN THE ORDER LIS position, or relationship to the tax				
	ions a i, enter your title,					
Designation— Insert above lette (ɑ–r).	Licensing jurisdiction (State) or other licensing authority (if applicable)	Bar, license, certification, registration, or enrollment number (if applicable)		Signature	Date	

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