Form	2848
(Rev.	January 2021)
	ment of the Treasury I Revenue Service

# **Power of Attorney** а

OMB No. 1545-0150 For IRS Use Only

Received by:

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Go to www.irs.gov/Form2848 for instructions and the latest information.

		Name		
Part I     Power of Attorney       Caution: A separate Form 2848 must be completed for each taxpayer. Form 2848 will not be honored				
1 Taxpayer information. Taxpayer must sign and date this form on pa	age 2, line 7.			
axpayer name and address	Taxpayer identification number(s)			
CHARLES MANTIONE	361-56-9005			
1016 CHERRY ST	Daytime telephone number Plan number (if application			
ALCOA, TN 37701	(423) 482-9737			
ereby appoints the following representative(s) as attorney(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 COLLINS	PTIN <b>P03013529</b>			
9301 OCOEE ST, #64	Telephone No. (423) 482-97	/37		
DOLTEWAH, TN 37363	Fax No. (423) 558-3274			
Check if to be sent copies of notices and communications	Check if new: Address D Telephone No.			
lame and address	CAF No			
	PTIN			
	Telephone No.			
	Fax No			
Check if to be sent copies of notices and communications	Check if new: Address D Telephone No.	Fax No. 🗌		
lame and address	CAF No			
	PTIN			
	Telephone No.			
	Fax No			
Note: IRS sends notices and communications to only two representatives.)	Check if new: Address D Telephone No. D	Fax No.		
ame and address	CAF No.			
	PTIN			
	Telephone No.			
	Fax No			
<b>Note:</b> IRS sends notices and communications to only two representatives.)	Check if new: Address Telephone No	Fax No. 🗌		

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).

Wh	ription of Matter (Income, Employment, Payroll, Excise, Estate, Gift, nistleblower, Practitioner Discipline, PLR, FOIA, Civil Penalty, Sec. 4980H Shared Responsibility Payment, etc.) (see instructions)	Tax Form Number (1040, 941, 720, etc.) (if applicable)	Year(s) or Period(s) (if applicable) (see instructions)
INCO	ME, SRP	1040	2000 - 2027
SEPA	RATE ASSESSMENTS	1040	2000 - 2027
CIVIL	PENALTIES	N/A	2000 - 2027
4	Specific use not recorded on the Centralized Authorization F CAF, check this box. See <i>Line 4. Specific Use Not Recorded on C</i>		· · _
5a	Itional acts authorized. In addition to the acts listed on line 3 above, I authorize my representative(s) to perform the following acts (see ructions for line 5a for more information):		

**b** 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 other specific deletions to the acts otherwise authorized in this power of attorney (see instructions for line 5b):

\_\_\_\_\_

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 declaration and signature. If a tax matter concerns a year in which a joint return was filed, each spouse must file a separate power of attorney even if they are appointing the same representative(s). If signed by a corporate officer, partner, guardian, tax matters partner, partnership representative (or designated individual, if applicable), executor, receiver, administrator, trustee, or individual other than the taxpayer, I certify I have the legal authority to execute this form on behalf of the taxpayer.

## ▶ IF NOT COMPLETED, SIGNED, AND DATED, THE IRS WILL RETURN THIS POWER OF ATTORNEY TO THE TAXPAYER.

Signature

Date

Title (if applicable)

## CHARLES MANTIONE Print name

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 declare that:

- I am not currently suspended or disbarred from practice, or ineligible for practice, before the Internal Revenue Service;
- I am subject to regulations in Circular 230 (31 CFR, Subtitle A, Part 10), as amended, governing practice before the Internal Revenue Service;
- I am authorized to represent the taxpayer identified in Part I for the matter(s) specified there; and

· I am one of the following:

- a Attorney—a member in good standing of the bar of the highest court of the jurisdiction shown below.
- **b** Certified Public Accountant—a holder of an active license 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)).

# ▶ 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 Ietter <b>(a–r).</b>	Licensing jurisdiction (State) or other licensing authority (if applicable)	Bar, license, certification, registration, or enrollment number (if applicable)	Signature	Date
с	IRS	00150946-EA	DAVID COLLINS	05/01/2024