

## Part 1 – Taxpayer Information

|                                       |       |                       |                          |                                    |
|---------------------------------------|-------|-----------------------|--------------------------|------------------------------------|
| Taxpayer's last name or business name |       | Taxpayer's first name |                          | ID number                          |
| Spouse's last name                    |       | Spouse's first name   |                          | Spouse's ID number                 |
| Current address                       |       |                       |                          | Daytime telephone number<br>(    ) |
| City                                  | State | Zip code              | Email address (optional) |                                    |

## Part 2 – Representative(s)

If an individual(s) name is provided, authority is limited to that individual(s). If a business name is provided without specifying an individual, authority is granted to employees of the business.

**Check only one** (see instructions):

**Add** - appoints a new or additional representative

**Revoke** - ends the representative named below

|                        |                         |          |                            |
|------------------------|-------------------------|----------|----------------------------|
| Business legal name    |                         |          | Telephone number<br>(    ) |
| Individual's last name | Individual's first name |          | Telephone number<br>(    ) |
| Individual's last name | Individual's first name |          | Telephone number<br>(    ) |
| Mailing address        |                         |          | Fax number<br>(    )       |
| City                   | State                   | Zip code | Email address              |

If revoking a representative, skip Part 3 and sign and date the form.

## Part 3 – Authority Granted

**I grant full authority to the representative(s)** - The representative(s) named above has full authority to perform any act with respect to matters before the department that the taxpayer(s) can and may perform, including receiving confidential Wisconsin tax information. **Note:** If granting full authority, do not check any boxes on the next page.



|               |           |
|---------------|-----------|
| Taxpayer Name | ID Number |
|---------------|-----------|

**Part 3 – Authority Granted** *(continued)*

**I grant limited authority to the representative(s)** - (check only items below for which you are granting authority.) The representative(s) named above has authority to perform any act, with respect to the items checked below, that the taxpayer(s) can and may perform, including the authority to receive confidential Wisconsin tax information.

- Limited Authority**                      **Period(s) (optional)**
- Income or Franchise Taxes \_\_\_\_\_
  - Sales and Use Taxes \_\_\_\_\_
  - Excise Taxes \_\_\_\_\_
  - Property Taxes \_\_\_\_\_

- Limited Authority**                      **Period(s) (optional)**
- Employer Withholding Taxes \_\_\_\_\_
  - Pass-Through Withholding Taxes \_\_\_\_\_
  - Nontax Debt \_\_\_\_\_
  - Other (describe below) \_\_\_\_\_

**Part 4 – Signature of Taxpayer(s)**

*I understand that the execution of this Power of Attorney does not relieve me of personal responsibility for correctly and timely reporting and paying taxes, or from the penalties, fees, or interest for failure to do so, all as provided for under Wisconsin tax law. I understand a photocopy, faxed copy, and/or electronic copy of this form has the same authority as the signed original.*

*If signed by a corporate officer, general partner, managing member, or fiduciary on behalf of the taxpayer, I certify that I have the authority to execute this Power of Attorney on behalf of the taxpayer.*

|           |       |      |
|-----------|-------|------|
| Signature | Title | Date |
|           |       |      |
| Signature | Title | Date |
|           |       |      |

**Note:** All notices that are automatically generated by the department’s computer system will be sent only to the taxpayer. If the representative needs copies of these notices, the representative must request a copy each time a notice is issued if it cannot be accessed in My Tax Account as an approved third party.

