

STATE OF TEXAS

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§
§

COUNTY OF _____

LIMITED POWER OF ATTORNEY

I, _____, _____, hereby appoint
TITLE

Name: _____

Address: _____

City, State and

ZIP code: _____

Phone

(Area code & number): _____

E-mail

address: _____

as Agent and attorney acting on behalf of _____, Texas

Taxpayer No. _____ for the tax type _____

covering the periods _____ for the following limited and special purposes:

- ☐ To provide information as requested for the purpose of my tax audit(s).
- ☐ To discuss relevant issues pertaining to my tax audit(s).
- ☐ To receive mail from the Comptroller regarding my tax audit(s) and/or contested case(s).
- ☐ To enter into a written agreement extending the period of limitation during which the tax may be assessed, accept a notification of the 60 day requirement to obtain records and/or certificates, and accept a notification of sampling procedure. (This would normally be an officer of a corporation, a partner, or owner.)
- ☐ To provide representation and make oral and written presentations of fact or argument related to my contested case(s).
- ☐ I grant the above named AGENT full power to substitute one or more attorneys or other representatives to carry out the powers and duties specified above.

Entity name: _____

Authorized

Representative: _____

PRINT

Title _____

**sign
here** ▶

Date _____