

Joint Tax Return Power of Attorney

This Power of Attorney authorizes the designated representative to sign, execute, and file a joint federal and/or state income tax return on behalf of the taxpayers named below.

1. Taxpayer Information

Primary Taxpayer Name:
Social Security Number (SSN):
Street Address:
City, State, Zip Code:
Spouse Name:
Social Security Number (SSN):
Street Address (if different):
City, State, Zip Code:

2. Representative Appointed (Attorney-in-Fact)

Representative Name:
Firm or Organization (if applicable):
Street Address:
City, State, Zip Code:
Telephone Number:

3. Tax Matters and Years Authorized

The representative named above is authorized to act as the attorney-in-fact for the taxpayers to sign, file, and submit a joint personal income tax return (e.g., Form 1040) for the following tax year(s):

Tax Year(s):
Tax Form Number(s):

4. Signatures of Taxpayers

By signing below, we certify that we authorize the representative named in Section 2 to sign and file our joint tax return for the tax year(s) specified above.

Primary Taxpayer Signature:
Date:
Spouse Signature:
Date:

5. Notary Public Acknowledgement (Optional/Recommended)

State of:
County of:

On this day of , 20 , before me personally appeared the taxpayers named above, known to me to be the individuals described in and who executed the foregoing instrument, and acknowledged that they executed the same.

Notary Public Signature:
My Commission Expires:

