



Application Form

First name: John Last name: Carter
 Date of birth: 6 Avg, 1994 SSN: 123 - 45 - 6789
 Street: 25 New Street Apt #: 4
 City: Novi Sad Postal code: 21000
 Country: Serbia Tel: +381649368383
 Email: easytaxstore@gmail.com Today's date: 23 Jan 2018
 W&T agency through which you went to USA: Work and Travel Agency

Visa type you were in USA: J1 Date of arrival in the USA: 7 Jun 2017
 Date of departure from the USA: 12 Sep 2017

Have you ever applied for USA tax refund before: Yes No If YES explain: in 2015, I was in USA for 102 days and my AGI is \$7099

What was the cost of your flight to the USA? \$ 685

I would like my refund: 1. by check on home address:

2. on USA bank account:

Routing #: _____

Account #: _____

How many employers you had in USA: 1 2 3 2 (if you don't have W-2's please fill out information under)

Company name: McDonalds Tel: 773/211-4414

Address: 1 Main St, Chicago, IL 61447

Notes:

Lakefront Restaurant
 62 Ontario Drive
 Chicago, IL 61774
 773/252-6324

Don't forget to scan social security card and first page of your passport.

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 document. 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 Signature of taxpayer. 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, executor, receiver, administrator, or trustee on behalf of the taxpayer, I certify that 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.

X J Carter _____ X 01/23/2018 _____
 Signature Date Title (if applicable)

X JOHN CARTER _____
 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 contained 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—licensed to practice as a certified public accountant is active in the jurisdiction shown below.
 - c. Enrolled Agent—enrolled as an agent by the Internal Revenue Service 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 Internal Revenue Service 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. Student Attorney or CPA—receives permission to represent taxpayers before the IRS by virtue of his/her status as a law, business, or accounting student working in an 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 letter (a-r). | Licensing jurisdiction (State) or other licensing authority (if applicable). | Bar, license, certification, registration, or enrollment number (if applicable). | Signature | Date |
|---|---|--|-----------|------|
| C | IRS | 00098142-EA | | |
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Customer agreement

I confirm that:

1. I have signed the necessary power of attorneys to authorize Easy Tax Store to prepare this tax return and represent me before the US Tax Authorities (IRS and State Tax Authorities).
2. I authorize Easy Tax Store to receive all correspondence from the US Tax Authorities on my behalf.
3. I want to avail of the offer to "pay no fee up-front" when I sign up for the service. In order to avail of this option, I understand that the fee will need to be paid by me when the refund has been issued by the US Tax Authorities.
4. I authorize Easy Tax Store to receive my refund cheque(s) from the Tax Authorities.
5. Should I receive the refund directly from any other source other than Easy Tax Store, I understand and agree that I will pay the fee due to the Agent for the work completed. Every tax year is charged separately.
6. I understand that IRS and State Tax Authorities holds right to delay refund at any time until they finish review.
7. Should I owe income tax for other tax years, and the US Tax Authorities deduct this owed money from the refund due for other tax year (s), I understand and agree that I need to pay Easy Tax Store processing fee for each tax year for which a tax return was processed.
8. I understand that the US Tax Authorities will make the final decision on the value of any refund due. I understand that Easy Tax Store will provide the best estimation possible based on current tax law and information given, however this is estimation only, not a guarantee.
9. I understand that IRS and State Tax authorities can request W-2 forms and Easy Tax Store is not responsible for obtaining them.
10. I understand that information collected in writing and/or verbally for US tax return filing services can and may be used for internal auditing purposes by Easy Tax Store and provided to the US Tax Authorities (IRS and State Tax Authorities) for external auditing purposes, subject to relevant data protection legislation.
11. I confirm that I have given Easy Tax Store all information needed and available to me.
12. I commit to updating Easy Tax Store of any change in my contact details.

Signature: J Carter

Date: 01/23/2018

Print Name: JOHN CARTER