

## POWER OF ATTORNEY AND DECLARATION OF REPRESENTATIVE

| HARRISBURG, PENNSYLVANIA 17  | 128-1061                               |  |  |  |
|--|--|--|--|--|
| PART I   | Power of Attor                         | ney  |  |  |
| Taxpayer(s) name, ider   | ntifying number, and                   | address including ZIP cod                            | le   |  |
|  |  |  |  |  |
| hereby appoints [name  | e(s), address(es), inc                 | luding <b>ZIP</b> codes(s), and t                    | elephone numbers(s)                          | of individual(s)]*   |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| an attamany(a) in fact to  |  | war(a) before any office of                          | i tha DA Danastonant a                       | of Davisaria for the following   |
| tax matter(s). [Specify  | the type(s) of tax and                 | d year(s) or period(s)]:                             | the PA Department of                         | of Revenue for the following   |
| TYPE<br>(INDIVIDUAL, CO  | OF TAX                                 | STATE TAX FORM NUMBER                                | YEAR(S) O                                    | R PERIOD(S)  |
| (INDIVIDUAL, OC  | KI OKAIL, LIO,                         | TOKIN NOMBER   |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| and to perform any a   | and all acts that the                  | e principal(s) can perforncks, and the power to sign | n with respect to the                        | eceive confidential information<br>e above specified tax matter<br>pecifically granted below). |
| Send copies of notices above tax matters to:                                     | and other written co                   | nmunications addressed                               | to the taxpayer(s) in p                      | proceedings involving the  |
| Initial here > for the above tax matte   | ers to: e first named above.           | granting the power to rece                           | eive, but not to endors                      | se or cash, refund checks  |
| This power of attorned PA Department of Rethe following:                         | ey revokes all earlivenue for the same | er powers of attorney a<br>e matters and years or    | nd tax information a<br>periods covered by t | authorizations on file with the this power of attorney, excep                                  |
| (Specify to whom   | granted, date, and addre               | ss including ZIP code, or refer to                   | attached copies of earlier                   | powers and authorizations.)  |
| Signature of or for taxp<br>If signed by a corporate<br>to execute this power of | e officer, partner, or f               | fiduciary on behalf of the to of the taxpayer.)      | axpayer, I certify that                      | I have the authority   |
|  | (Signature)                            |  | (Title)                                      | (Date)   |

(Title)

(Date)

(Signature)

\*An organization, firm, or partnership may not be designated as a taxpayer"s representative.

|   |  | ed to a person other vitnessed or notarize | than an attorney or certifieded below. | l public accour | ntant, the                                  |           |  |  |  |
|---|--|--|--|-----------------|---|-----------|--|--|--|
| The person(s)   | signing as or for  | the taxpayer(s): (Ch                       | eck and complete one.)                 |                 |   |           |  |  |  |
| ☐ is/are kr   | nown to and signe  | ed in the presence of                      | the two disinterested witnes           | sses whose siç  | gnatures appea                              | ar here:  |  |  |  |
|   | (Signature of Witness)   |  |  |                 | (Date)                                      |           |  |  |  |
|   |  | (Signature of Witne                        | ess)                                   | (Date)          |   |           |  |  |  |
| ☐ appeare   | ed this day before   | a notary public and                        | acknowledged this power of             | attorney as a   | voluntary act a                             | and deed. |  |  |  |
| Witness(Signature of Notary)                                  |  |  |  | _               | NOTARIAL SEAL<br>(If required by State Law) |           |  |  |  |
| PART II   | Declaration of Representative  |  |  |                 |   |           |  |  |  |
| I decla   | are that I am one  | of the following:                          |  |                 |   |           |  |  |  |
| 1   | a member in good standing of the bar of the highest court of the jurisdiction indicated below;   |  |  |                 |   |           |  |  |  |
| 2   | duly qualified to practice as a certified public accountant in the jurisdiction indicated below; |  |  |                 |   |           |  |  |  |
| 3   | a bona fide officer of the taxpayer organization;  |  |  |                 |   |           |  |  |  |
| 4   | a full time employe of the taxpayer;   |  |  |                 |   |           |  |  |  |
| 5   | a member of the taxpayer's immediate family (spouse, parent, child, brother or sister);          |  |  |                 |   |           |  |  |  |
| 6   | a fiduciary for the taxpayer;  |  |  |                 |   |           |  |  |  |
| 7   | Other (specify) >;   |  |  |                 |   |           |  |  |  |
| and that I am   |  |  | dentified in Part I for the Tax        | matters there   | specified.                                  | ·         |  |  |  |
| DESIGNATION<br>(INSERT APPROPRIATE NUMBER<br>FROM ABOVE LIST) |  | JURISDICTION<br>(STATE, ETC.)              |  | SIGNATURE       |   | DATE      |  |  |  |
|   |  |  | - Beehard N.                           | Valent          | The   |           |  |  |  |
|   |  |  |  |                 |   |           |  |  |  |
|   |  |  |  |                 |   |           |  |  |  |
|   |  |  |  |                 |   |           |  |  |  |
|   |  |  |  |                 |   |           |  |  |  |
|   |  |  |  |                 |   |           |  |  |  |
|   |  |  |  |                 |   |           |  |  |  |