

KS DO-10 Power of Attorney

What is it for?

This form tells the Kansas Department of Revenue that you are allowing PPL to represent you in matters concerning state taxes.

Will PPL be able to get information about my personal income taxes now?

No. This form does NOT allow PPL representatives to obtain any personal income tax information or to sign for any personal income tax matters.

How long will this Power of Attorney be in effect?

The authority granted by this Power of Attorney will last until you revoke it or file a new form.

Which sections do I complete?

PPL has completed most of the information for you. You only need to **review, sign, and date the form in Section 3 Signature of Taxpayer or Taxpayers (example below) and return the completed form to the KS WORK program, through PPL.**

KANSAS DEPARTMENT OF REVENUE POWER OF ATTORNEY				800618
1. TAXPAYER INFORMATION. Include spouse's name if this is for a joint return. If a business, enter both its legal name and its trade or DBA name. Both the person granting and the person being granted the power of attorney <u>must</u> sign and date this form below in Sections 3 and 4.				
Taxpayer's Name (if a business include both legal name and DBA name) Employer Name			Taxpayer's Social Security Number	
Address Employer Address	City Employer City	State ER, State	Zip Code ER, ZIP	EIN/SSN/PTIN
Spouse's Name			Spouse's Social Security Number	
Address (if different)		City	State	Zip Code
			Area Code & Phone Number Employer Phone	
2. TAXPAYER GRANT OF POWER OF ATTORNEY. I hereby appoint the following attorney, accountant, or other representative as my attorney-in-fact:				
Representative's name and title (if member of a firm, enter both the representative's name and firm name)			Phone Number	
Address			Fax Number	
City		State	Zip Code	EIN/SSN/PTIN
Representative's name and title (if member of a firm, enter both the representative's name and firm name)			Phone Number	
Address			Fax Number	
City		State	Zip Code	EIN/SSN/PTIN
To represent me before the Kansas Department of Revenue for the following tax matters:				
Type of Tax (Individual Income, Sales, Withholding, etc.)			Tax Year(s) or Period(s)	
Withholding			All Tax Periods	
AUTHORIZED ACTS. For the tax types and periods listed, the representative(s) are authorized to (check all applicable boxes):				
<input type="checkbox"/> Receive and inspect my confidential tax information.		<input type="checkbox"/> Sign agreements, consents or other documents on my behalf.		
<input type="checkbox"/> Represent me in tax matters before the department.		<input checked="" type="checkbox"/> Perform any act that I can perform with respect to the tax matter listed above.		
List any specific additions or deletions to the acts that are otherwise authorized in this power of attorney (see Instructions).				
RETENTION/REVOCAION OF PRIOR POWERS OF ATTORNEY. I hereby revoke all earlier powers of attorney on file with the Kansas Department of Revenue for the same tax matters and periods covered by this document. <input type="checkbox"/> Check here if you DO NOT wish to revoke a prior power of attorney. <u>Enclose</u> a copy of any power of attorney you wish to remain in effect.				
3. SIGNATURE OF TAXPAYER(S). If a tax matters concern a joint return, both husband and wife must sign when joint representation is requested. When a corporate officer, partner, guardian, executor, receiver, administrator, or trustee signs this section on behalf of a taxpayer, the signatory also certifies that the signatory is authorized to execute this form on behalf of the taxpayer.				
(Signature)		Employer Name		(Date)
(Signature)		(Printed Name)		(Date)
4. SIGNATURE OF REPRESENTATIVE(S).				
(Signature)		David Goldberg		(Date)
(Signature)		Thomas Murphy		(Date)
(Signature)		(Printed Name)		(Date)

3. SIGNATURE OF TAXPAYER OR TAXPAYERS. If a tax matter concerns a joint return, both the husband and wife must sign when joint representation is requested. When a corporate officer, partner, guardian, executor, receiver, administrator, or trustee signs this section on behalf of a taxpayer, the signatory also certifies that the signatory is authorized to execute this form on behalf of the taxpayer.		
<u>John Hancock</u> (Signature)	<u>John Hancock</u> (Printed Name)	<u>06-21-2012</u> (Date)
_____ (Signature)	_____ (Printed Name)	_____ (Date)