



Municipality of Sebring Income Tax Division Power of Attorney

KNOW ALL MEN BY THESE PRESENT:

That I, _____ of _____ County of _____,
Name of Grantor Address County
State of _____, have made, constituted and appointed, and by this document, do hereby
State
appoint _____ of _____ County of _____,
Name of Grantee Address County
State of _____, (_____) _____, my true and lawful attorney in fact, for me and in
State Phone Number
my name and stead. I hereby grant unto my said attorney full power of authority to do and perform any
and every act and thing that I might or could do, if personally present. I hereby ratify and confirm all
that my said attorney shall lawfully do or cause to be done by virtue of the **POWER OF ATTORNEY**.

This **POWER OF ATTORNEY** is limited for use at the Municipality of Sebring, Income Tax Division. I understand that the grantee may be permitted to view my tax record, including filings and income received, and I further understand that the grantee may sign agreements and or admit liability on my behalf. Only the person named in this **POWER OF ATTORNEY**, after proper identification, shall have the authority given by this document.

IN WITNESS WHEREOF, I have hereto set my hand this _____ day of _____, _____.

Name of Grantor

State of Ohio
County of Mahoning

Be it remembered that the above named person personally appeared before me, a (notary / attorney) in and for said County, and acknowledged that (he / she) did sign the foregoing instrument and that the same is (his / her) voluntary act and deed. In witness whereof, I have subscribed my name and official seal this _____ day of _____, _____.

Signature of Notary Public