



Wyoming Department of Revenue

Excise Tax Division 122 W. 25th Street, Herschler Bldg. Cheyenne, Wyoming 82002-0110 http://revenue.wyo.gov

Excise Tax Division Limited Power of Attorney

Sales/Use Tax License Number:		
Revenue Identification Number:		
Business'/Owner's/Taxpayer's I	Name:	
Mailing Address:		
	N: I/We have appointed above mentioned taxpayer before the Wyork cise tax matters until further notice:	ning Excise Tax
Tax Type (Sales, Use, Estate, Cigarette, etc.)	Document Requested (Tax returns - specify form #, written determinations, notices, etc.)	Year(s) or Period(s)
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1 7 1 5	ry that I have the authority to sign this limited 1	power of attorney
for the above mentioned taxpaye	er:	
Authorized by:	Title:	
	wner; Corporation – Major Officer; C or LLP – Member or Manager)	
Phone Number:	Date:	
The foregoing do	cument was acknowledged before me by	
	cument was acknowledged before me by nis day of	
	and official seal,	
(Notary Public).	My commission expires	
Return signed original to: Wyoming Department of Revenue Excise Tax Division, Herschler Bldg. 122 W. 25 th St., 2 nd Floor West Cheyenne, WY 82002-0110 For questions 307-777-		