



**Wyoming Department of Revenue**  
 Excise Tax Division  
 122 W. 25th Street, Herschler Bldg.  
 Cheyenne, Wyoming 82002-0110  
<http://revenue.state.wy.us>



\*0-0-1201-099\*

**Excise Tax Division**  
**Limited Power of Attorney**

Sales/Use Tax License Number: \_\_\_\_\_

Revenue Identification Number: \_\_\_\_\_

Business'/Owner's/Taxpayer's Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

TO WHOM IT MAY CONCERN: I/We have appointed \_\_\_\_\_  
 as our agent to represent the above mentioned taxpayer before the Wyoming Excise Tax  
 Department for the following excise tax matters until further notice:

| 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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|  |  |                      |
|  |  |                      |

I declare under penalty of perjury that I have the authority to sign this limited power of attorney for the above mentioned taxpayer:

Authorized by: \_\_\_\_\_ Title: \_\_\_\_\_  
(Individual Business – Owner; Corporation – Major Officer; Partnership – Partner; LLC or LLP – Member or Manager)

Phone Number: \_\_\_\_\_ Date: \_\_\_\_\_

*The foregoing document was acknowledged before me by \_\_\_\_\_  
 \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.*

*Witness my hand and official seal, \_\_\_\_\_*

*(Notary Public). My commission expires \_\_\_\_\_.*

Return signed original to: Wyoming Department of Revenue  
 Excise Tax Division, Herschler Bldg.  
 122 W. 25<sup>th</sup> St., 2<sup>nd</sup> Floor West  
 Cheyenne, WY 82002-0110

For questions, please call:  
**307-777-5200**