



Department of the Treasury
Internal Revenue Service
Small Business / Self-Employed Division
1100 COMMERCE STREET MC 5142
DALLAS, TX 75242-1027

POA Copy

Date:
08/06/2019
Person to contact:
Name: [REDACTED]
Employee ID number: 10-00782215
Telephone: (214) 413-5820
Taxpayer ID number:
[REDACTED]

Balance \$41,289.63
Installment Agreement \$662.00

We approved your request to pay your taxes in installments. Your first payment of \$662.00 is due on 09/28/2019. You agreed to make future payments of \$662.00 on the 28th of each following month until you pay the full amount.

The amount you owe as of 08/06/2019 is \$41,289.63. This amount does not include all accrued penalties and interest. We will charge applicable penalties and interest until you pay the full amount you owe, because you didn't pay your total tax when it was due.

You agreed to pay us by direct debit. This means your financial institution will subtract (debit) the amount of your monthly payment from your checking or savings account on the same day each month and send that amount to us. Paying by direct debit also authorizes a financial institution to receive confidential information necessary to answer inquiries and resolve issues related to your payment. Remember to subtract the payments from your account balance each month.

If you don't have enough money in your checking or savings account for the monthly payment, we must charge a penalty of \$25 or two percent of your monthly payment, whichever is larger. If your monthly payment is less than \$25, the penalty amount will be the payment amount.

Note: If we're charging backup withholding on any of your accounts, it will continue. Having an installment agreement doesn't stop backup withholding.

Although we've established an installment plan for you, we must protect the government's interest. Therefore, we may still file a Notice of Federal Tax Lien.

HAS ALREADY BEEN FILED

Conditions of this agreement:

- We must receive each payment by the date shown above. If you cannot make your monthly payment, contact us immediately.
- This agreement is based on your current financial condition. We may change or cancel it if we show your ability to pay has significantly changed.
- We may cancel this agreement if you don't give us updated financial information when we ask for it.
- While this agreement is in effect, you must pay any federal taxes you owe on time.
- We'll apply your federal tax refunds (if any) to the amount you owe until it is fully paid.
- If you don't meet the conditions of this agreement, we'll cancel it, and may collect the entire amount you owe by levy on your income, bank accounts or other assets, or by seizing your property.

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- We may cancel the agreement at any time if we find that collection of the tax is in jeopardy.
- You must pay a \$225.00 one-time installment fee (\$107.00 if direct debit installment agreement).
- If the agreement defaults, you must pay an \$89.00 fee to reinstate it.
- We'll let you know if you are a low-income taxpayer and qualify for the reduced installment fee (\$43.00) or meet certain conditions that would allow us to waive or reimburse that reduced fee. If we don't qualify you as a low-income taxpayer, you can request reconsideration using Form 13844, Application For Reduced User Fee For Installment Agreements.
- We'll apply all payments on this agreement in the best interest of the United States.

Note: If we propose to change or cancel your agreement for any reason, we'll send you, in most situations, a notice advising you of our proposal and give you the opportunity to appeal the change or cancellation.

Additional conditions

This installment agreement includes taxes for the following forms and tax periods:

<u>Form</u>	<u>Tax Period</u>	<u>Form</u>	<u>Tax Period</u>	<u>Form</u>	<u>Tax Period</u>
1040	12/31/2012				

If you have questions, you can call the telephone number at the top of this letter.

Thank you for your cooperation.

Sincerely,


DANIEL VEGA
REVENUE OFFICER



Department of the Treasury
Internal Revenue Service
Small Business / Self-Employed Division
1100 COMMERCE STREET MC 5142
DALLAS, TX 75242-1027

Date:
08/06/2019
Taxpayer ID number (last 4 digits):
[REDACTED]
Taxpayer name:
[REDACTED]

DIONNE R CHESHER
CNA ASSOCIATES
2117 WEST AIRPORT FREEWAY SUITE 10
IRVING, TX 75602

Person to contact:
DANIEL VEGA
Employee ID number:
10-00782215
Contact telephone number:
(214) 413-5820
Contact fax number:
(877) 619-3060

We are sending the enclosed material under the provisions of your power of attorney or other authorization we have on file. For your convenience, we have listed the name of the taxpayer to whom this material relates in the heading above.

If you have any questions, please call the contact person at the telephone number shown in the heading of this letter.

Thank you for your cooperation.

Sincerely,

A handwritten signature in black ink, appearing to be "D. Vega".

DANIEL VEGA
REVENUE OFFICER

Enclosures:
L2849