

Instrukcije za popunjavanje:



Molimo Vas popunite i priložite sledeća dokumenta:

- » Popunjen formualar za povraćaj US poreza
- » Potpisan 2848 formular (*Power of Attorney Form*) – dve strane:
 - Potrebna samo strana 2*: potpišite i stavite datum pored znakova X (*page 2, line 7*)
- » Kopiju prve strane pasoša
- » Kopiju socijalnog broja (*SSN card*)
- » W-2 obrazac ili poslednji *pay check* (ukoliko ste imali više od jednog poslodavca, potrebno je priložiti W-2 obrasce ili poslednje *pay check*-ove sa svih radnih mesta)

IRS zahteva da sva dokumenta budu skenirana na sledeći način:

- » Podesite skener na crno-belo skeniranje i rezoluciju na 300 dpi (tačkaka po inču)
- » Snimite fajl u PDF ili JPEG formatu
- » Veličina fajla ne bi trebala da bude veća od 2MB

Kompletiranu dokumentaciju možete dostaviti **putem email-a, običnom poštom ili lično**. Ukoliko imate pitanja slobodno nas kontaktirajte.

Vaš **Easy Tax Store** tim

Formular za povraćaj USA poreza

Ime: _____ Prezime: _____

Datum rođenja: day / month / year SSN: _____ - _____ - _____

Ulica i Br: _____ Br stana: _____

Grad: _____ Poštanski Br: _____

Država: _____ Tel: _____

Email: _____ Datum popunjavanja: _____

W&T Agencija preko koje ste išli u USA: _____

Tip vize na kojoj ste boravili u US: _____ Datum ulaska u US: day month year 

Datum izlaska iz US: day month year 

Da li ste ikad ranije povraćaj US poreza: DA Ne Ukoliko DA objasnite (godina, vreme boravka):



Koliko vas je koštao program za odlazak u USA? \$ _____

Koliko vas je koštala avionska karta do USA? \$ _____

Povraćaj novca želite: 1. Čekom na kućnu adresu:

2. Na račun u **USC banci**:

Routing #: _____ Account #: _____

Informacije o  **W2**  (ukoliko nemate W2 popuniti):

Naziv kompanije za koju ste radili: _____

Šifra: _____

Napomena:

Uz formular potrebno je priložiti kopiju prve strane pasoša, socijalnog broja(SSN) i W2 obrasca.

Power of Attorney and Declaration of Representative

OMB No. 1545-0150

For IRS Use Only

Received by: _____
 Name _____
 Telephone _____
 Function _____
 Date / /

▶ **Type or print.** ▶ **See the separate instructions.**

Part I Power of Attorney

Caution: A separate Form 2848 should be completed for each taxpayer. Form 2848 will not be honored for any purpose other than representation before the IRS.

1 Taxpayer information. Taxpayer must sign and date this form on page 2, line 7.

Taxpayer name and address	Taxpayer identification number(s)
	Daytime telephone number Plan number (if applicable)

hereby appoints the following representative(s) as attorney(s)-in-fact:

2 Representative(s) must sign and date this form on page 2, Part II.

Name and address	CAF No. _____ PTIN _____ Telephone No. _____ Fax No. _____
Check if to be sent notices and communications <input type="checkbox"/>	Check if new: Address <input type="checkbox"/> Telephone No. <input type="checkbox"/> Fax No. <input type="checkbox"/>
Name and address	CAF No. _____ PTIN _____ Telephone No. _____ Fax No. _____
Check if to be sent notices and communications <input type="checkbox"/>	Check if new: Address <input type="checkbox"/> Telephone No. <input type="checkbox"/> Fax No. <input type="checkbox"/>
Name and address	CAF No. _____ PTIN _____ Telephone No. _____ Fax No. _____
	Check if new: Address <input type="checkbox"/> Telephone No. <input type="checkbox"/> Fax No. <input type="checkbox"/>

to represent the taxpayer before the Internal Revenue Service for the following matters:

3 Matters

Description of Matter (Income, Employment, Payroll, Excise, Estate, Gift, Whistleblower, Practitioner Discipline, PLR, FOIA, Civil Penalty, etc.) (see instructions for line 3)	Tax Form Number (1040, 941, 720, etc.) (if applicable)	Year(s) or Period(s) (if applicable) (see instructions for line 3)

4 Specific use not recorded on Centralized Authorization File (CAF). If the power of attorney is for a specific use not recorded on CAF, check this box. See the instructions for Line 4. **Specific Uses Not Recorded on CAF**

5 Acts authorized. Unless otherwise provided below, the representatives generally are authorized to receive and inspect confidential tax information and to perform any and all acts that I can perform with respect to the tax matters described on line 3, for example, the authority to sign any agreements, consents, or other documents. The representative(s), however, is (are) not authorized to receive or negotiate any amounts paid to the client in connection with this representation (including refunds by either electronic means or paper checks). Additionally, unless the appropriate box(es) below are checked, the representative(s) is (are) not authorized to execute a request for disclosure of tax returns or return information to a third party, substitute another representative or add additional representatives, or sign certain tax returns.

Disclosure to third parties; Substitute or add representative(s); Signing a return; _____

Other acts authorized: _____
(see instructions for more information)

Exceptions. An unenrolled return preparer cannot sign any document for a taxpayer and may only represent taxpayers in limited situations. An enrolled actuary may only represent taxpayers to the extent provided in section 10.3(d) of Treasury Department Circular No. 230 (Circular 230). An enrolled retirement plan agent may only represent taxpayers to the extent provided in section 10.3(e) of Circular 230. A registered tax return preparer may only represent taxpayers to the extent provided in section 10.3(f) of Circular 230. See the line 5 instructions for restrictions on tax matters partners. In most cases, the student practitioner's (level k) authority is limited (for example, they may only practice under the supervision of another practitioner).

List any specific deletions to the acts otherwise authorized in this power of attorney: _____

