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| **STATE OF NORTH CAROLINA** | | | | | | | | | | | | | | | | |
| **POWER OF ATTORNEY** | | | | | | | | | | | | | | | | |
| **COUNTY OF** | |  | | | |  | | | | | | | | | | |
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| Secretary of Revenue  Revenue Building P. O. Box 25000 Raleigh, North Carolina 27640 | | | | | | | | | | | | | | | | |
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| I/We, the undersigned, have made, constituted and appointed and, by these presents, do make, constitute and appoint Christopher J. Coughlin, an employee of the North Carolina Department of Transportation, my/our and lawful attorney for me/us and in my/our name, place and stead to apply for and obtain the North Carolina Department of Revenue my/our income tax returns for the taxable years 20      and 20     , and deliver the same to the Right of Way Branch, North Carolina Department of Transportation. | | | | | | | | | | | | | | | | |
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| I/We do hereby expressly waive the benefit of secrecy of the aforesaid returns provided by the terms of G.S. 105-259 when the same are delivered to our aforesaid attorney-in-fact. | | | | | | | | | | | | | | | | |
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| Date this | | |  | day of | | |  | | | | , 20 |  | | . | | |
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| (Federal Tax Identification or S.S. No.) | | | | | | | |  | | (Federal Tax Identification or S.S. No.) | | | | | | |
| Witness: | | | | | | | |
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| (Signature) | | | | | | | |
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| Project No.: |  | | | | TIP/Parcel No. | | | |  | | | | Displacee No. | |  | |