

BEFORE THE IDAHO BOARD OF TAX APPEALS

_____,)
Appellant,) Appeal No(s). _____
v.)
_____,)
Respondent.)
_____)

NOTICE OF APPEARANCE

_____ hereby enters an appearance as Representative
of Record for _____.

Respectfully submitted this _____ day of _____, 20__

Signature of Representative

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that on this _____ day of _____, 20 _____,
 I caused to be served a true copy of the foregoing NOTICE OF APPEARANCE by the
 method indicated below and addressed to each of the following:

| | |
|--|--|
| Name: _____ Mailing Address: _____ City/State/Zip: _____ | U.S. Mail, Postage Prepaid Facsimile Overnight Mail Other _____ |
| Name: _____ Mailing Address: _____ City/State/Zip: _____ | U.S. Mail, Postage Prepaid Facsimile Overnight Mail Other _____ |
| Name: _____ Mailing Address: _____ City/State/Zip: _____ | U.S. Mail, Postage Prepaid Facsimile Overnight Mail Other _____ |
| Name: _____ Mailing Address: _____ City/State/Zip: _____ | U.S. Mail, Postage Prepaid Facsimile Overnight Mail Other _____ |

 Signature

 Printed Name of Person Signing