Form **907** (Rev. June 1994)

Department of the Treasury—Internal Revenue Service

Agreement to	Evtond	the Time to	Bring	Quit
Agreement to	Exterio	the rime to	Dillig	Suit

In Reply Refer to:	
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SSN or EIN

	<u> </u>			'
		(Name)		, taxpayer(s)
		, ,		
of	(Numbe	or Stroot City or Town S	tata ZID Codo)	
1.0 50	cict Director of Internal Revenue, Regional Co e that the taxpayer(s) may bring suit to recover the			(International), or Regional Director of
the amounts :	shown below have been timely filed by the tax has been mailed to the taxpayer(s) by certified or r	payer(s), and these	claims have been disa	allowed in whole or in part. A notice of
	Period Ended	Kind of Tax	Amount of Tax	Date Notice of Disallowance Mailed or Waiver Filed
Refund Credit	r silod Ended			
the issues in above. You may sidered at a the particul identify the periods involved the period the pe	NT: You must submit with this agreement a state involved in the claims for refund or credit of the tax request in writing that the claims be reopened an any time before the expiration date shown. You sho lar circumstances on which you base the request claims in the request by stating the amounts clair olved, and the date and symbols appearing on the se of disallowance was given, or the date the waive filed. Attach a copy of this agreement to your re-	des listed Assis of Ap and recon- auld state agree Chief med, the tor of eletter in now in er (Form on the	tant Commissioner (Int peals signs it. You sho interests by bringing su ment is signed. If the D , Assistant Commission Appeals signs this agre	e effective until the District Director, ernational), or the Regional Director ould therefore be prepared to protect uit, if desired, at any time before this District Director, Regional Compliance her (International), or Regional Director, the final decision in any case of them in the disposition, of the issues is agreement.
Signature ins	structions are on the back of this form.			
Your Signatu	re Here →			(Date signed)
				(Bate digited)
Spouse's Sig	gnature Here →			(Date signed)
Taxpayer's R Sign Here	Representative →			(Date signed)
Corporate Name	→			(Euro Ogrico)
Corporate Officer(s)	(Title)			(Date signed)
Sign Here	CTitle)			(Date signed)
	District Director of Internal Revenue			gional Compliance Chief
	Regional Director of Appeals			Commissioner (International)
Ву	(Signature and Title)			(Date signed)

Instructions

If this agreement is for any year(s) you filed a joint return, both husband and wife must sign the original and copy of this form unless one, acting under a power of attorney, signs as agent for the other. The signatures must match the names as they appear on this form.

If you are an attorney or agent of the taxpayer(s), you may sign this agreement provided the action is specifically authorized by a power of attorney. If you didn't previously file the power of attorney, please include it with this form.

If you are acting as a fiduciary (such as executor, administrator, trustee, etc.) and you sign this agreement, also attach a completed Form 56, Notice Concerning Fiduciary Relationship, if you haven't already filed one.

If the taxpayer is a corporation, sign this agreement with the corporate name followed by the signature and title of the officer(s) authorized to sign.