WESTERN STATES OFFICE AND PROFESSIONAL EMPLOYEES PENSION FUND SECOND SUSPENSION APPLICATION

Exhibit 13

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Exhibit 13

POWER OF ATTORNEY AND DECLARATION OF REPRESENTATIVES BEFORE THE DEPARTMENT OF THE TREASURY FOR THE WESTERN STATES OFFICE AND PROFESSIONAL EMPLOYEES PENSION FUND

Applicant

The Board of Trustees of the Western States Office and Professional Employees Pension Fund 1220 S.W. Morrison St., Suite 300

Portland, OR 97205-2222 Contact: Suzanne Mode T: (503) 224-0048 F: (503) 228-0149

E: Suzanne.Mode@OPEIU8.org

Plan Number: 001 Plan EIN: 94-6076144

Applicant hereby appoints the following representative(s) as attorney(s)-in-fact to represent the taxpayer before the Department of the Treasury and perform acts related to the attached application dated August 24, 2017 for suspension of benefits under §432(e)(9) of the Internal Revenue Code of 1986, as amended.

Representatives' information:

CAF No.: 8000-4028R

Joseph L. Reinhart
Joseph L. Reinhart, P.C.
7355 SW Hermoso Way
Paul L. Graf
Rael & Letson
999 Third Avenue, Suite 1530

 Tigard, OR 97223
 Seattle, Washington 98104

 T: (503) 530-8384
 T: (206) 445-1852

 F: (503) 530-8837
 F: (206) 445-1840

E: <u>joe@nwerisalaw.com</u>
Licensing Jurisdiction: Oregon

Bar No.: 830795

E: <u>paulg@rael-letson.com</u>
Licensing Authority: Joint Board
Enrolled Actuary No.: 17-05627

EIN: 93-1162180 EIN: 94-1701048

Send copies of notices and communications to representative: YES.

With the exception of the acts described below, I authorize my representative(s) to receive and inspect my confidential tax information and to perform acts that I can perform with respect to the attached application dated August 24, 2017 for suspension of benefits under §432(e)(9). For example, my representative(s) shall have the authority to talk and communicate with Treasury officials about the application and sign any agreements, consents, or similar documents.

Specific acts not authorized: None.

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Signatures of Applicant and Date

Redacted by the U.S. Department of the Treasury	
Michael Parmelee, Co-Chair Authorized Trustee on behalf of the Board of Trustees for the Western States Office and Professional Employees Pension Fund 8-24-2017	Suzanne Mode, Co-Chair Authorized Trustee on behalf of the Board of Trustees for the Western States Office and Professional Employees Pension Fund
Date	Date
Declaration of Representatives	

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Under penalties of perjury, by my signature below I declare that:

- I am not currently suspended or disbarred from practice before the Internal Revenue Service;
- I am authorized to represent the Applicant for the matter(s) specified in this Power of Attorney and Declaration of Representative; and
- I am one of the following:
 - Attorney a member in good standing of the bar of the highest court of the jurisdiction shown below.
 - Certified Public Accountant duly qualified to practice as a certified public accountant in the jurisdiction shown below.
 - c. Enrolled Agent.
 - Officer a bona fide officer of the Applicant.
 - e. Full-Time Employee a full-time employee of the Applicant.
 - f. Enrolled Actuary enrolled as an actuary by the Joint Board for the Enrollment of Actuaries under 29 U.S.C. 1242 (the authority to practice before the Internal Revenue Service is limited by section 10.3(d) of Circular 230).
 - g. Enrolled Retirement Plan Agent.

Required information for Representative: A. See information presented above.

Redacted by the U.S. Department of the Treasury

Joseph L. Reinhart, Esq.

Date

8/24/17

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Signatures of Applicant and Date	Redacted by the U.S. Department of the Treasury	
Michael Parmelee, Co-Chair Authorized Trustee on behalf of the Board of Trustees for the Western States Office and Professional Employees Pension Fund	Suzanne Mode, Co-Chair Authorized Trustee on behalf of the Board of Trustees for the Western States Office and Professional Employees Pension Fund	
	8/24/17	
Date	Date	

Declaration of Representatives

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 - b. Certified Public Accountant duly qualified to practice as a certified public accountant in the jurisdiction shown below.
 - c. Enrolled Agent.
 - d. Officer a bona fide officer of the Applicant.
 - e. Full-Time Employee a full-time employee of the Applicant.
 - f. Enrolled Actuary enrolled as an actuary by the Joint Board for the Enrollment of Actuaries under 29 U.S.C. 1242 (the authority to practice before the Internal Revenue Service is limited by section 10.3(d) of Circular 230).
 - g. Enrolled Retirement Plan Agent.

Required information for Representative: A. See information presented above.

Signature of Representative and Date: Redacted by the U.S. Department of the Treasury		
	8/24/17	
Joseph L. Reinhart, Esq.	Date	

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Signatures of Applicant and Date

Redacted by the U.S. Department of the Treasury

Michael Parmelee, Co-Chair
Authorized Trustee on behalf of the Board of
Trustees for the Western States Office and
Professional Employees Pension Fund

Suzanne Mode, Co-Chair
Authorized Trustee on behalf of the Board of Trustees for the Western States Office and Professional Employees Pension Fund

8-24-2017

Date

Date

Declaration of Representatives

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- I am authorized to represent the Applicant for the matter(s) specified in this Power of Attorney
 and Declaration of Representative, and
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 - c Enrolled Agent
 - d. Officer a bona fide officer of the Applicant.
 - e Full-Time Employee a full-time employee of the Applicant.
 - Enrolled Actuary enrolled as an actuary by the Joint Board for the Enrollment of Actuaries under 29 U.S.C. 1242 (the authority to practice before the Internal Revenue Service is limited by section 10.3(d) of Circular 230).
 - g Enrolled Retirement Plan Agent

Required information for Representative. A. See information presented above

Redacted by the U.S. Department of the Treasury

Paul L. Graf, A.S.A., E.A., M.A.A

Date

8/24/2017

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Signatures of Applicant and Date

Redacted by the U.S. Department of the Treasury

Michael Parmelee, Co-Chair

Authorized Trustee on behalf of the Board of Trustees for the Western States Office and Professional Employees Pension Fund

Suzanne Mode, Co-Chair

Authorized Trustee on behalf of the Board of Trustees for the Western States Office and Professional Employees Pension Fund

8/24/17 Date

Date

Declaration of Representatives

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- I am authorized to represent the Applicant for the matter(s) specified in this Power of Attorney and Declaration of Representative; and
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 - d. Officer a bona fide officer of the Applicant.
 - e. Full-Time Employee a full-time employee of the Applicant.
 - f. Enrolled Actuary enrolled as an actuary by the Joint Board for the Enrollment of Actuaries under 29 U.S.C. 1242 (the authority to practice before the Internal Revenue Service is limited by section 10.3(d) of Circular 230).
 - g. Enrolled Retirement Plan Agent.

Required information for Representative: A. See information presented above.

Signature of Representative and Date:

Redacted by the U.S. Department of the Treasury

Paul L. Graf, A.S.A., E.A., M.A.A.A.

Date

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