	FORM
2017 California e-file Signature Authorization for l	ndividuals 887
Your name	Your SSN or ITIN
SHICHENG GUO	727-25-5836
Spouse's/RDP's name	Spouse's/RDP's SSN or ITIN
Part I Tax Return Information (whole dollars only)	
California Adjusted Gross Income. See instructions	••••••••••••••••••••••••••••••••••••••
,	
2 Amount You Owe. See instructions	
Refund or No Amount Due. See instructions	3 2
Part II Taxpayer Declaration and Signature Authorization (Be sure you obtain and keep a copy of yo	
o my electronic return originator (ERO), transmitter, or intermediate service provider (including my name, address, and soc ax identification number) and the amounts shown in Part I above agree with the information and amounts shown on the cor income tax return. If applicable, I authorize an electronic funds withdrawal of the amount on line 2 and/or the estimated tax and on form FTB 8455, California e-file Payment Record for Individuals, or a comparable form, If applicable, I declare that cat agrees with the direct deposit authorization stated on my return. If I have filed a joint return, this is an irrevocable appointment agent to authorize an electronic funds withdrawal or direct deposit, I authorize my ERO, transmitter, or intermediate service return to the Franchise Tax Board (FTB). If the processing of my return or refund is delayed, I authorize the FTB to disprovider, and/or transmitter the reason(s) for the delay or the date when the refund was sent. If I am filling a balance of the delay of the delay or the date when the refund was sent. If I am filling a balance of the delay of the delay of the tax liability and all applicable interest and because not receive full and timely payment of my tax liability, I remain liable for the tax liability and all applicable interest and humber (PIN) as my signature for my electronic income tax return and, if applicable, my Electronic Funds Withdrawal Conscitatory and the copy of my electronic Funds Withdrawal Conscitatory and the copy of my electronic Funds Withdrawal Conscitatory and the copy of my electronic Funds Withdrawal Conscitatory and the copy of my electronic Funds Withdrawal Conscitatory and the copy of my electronic Funds Withdrawal Conscitatory and the copy of my electronic Funds Withdrawal Conscitatory and the copy of my electronic Funds Withdrawal Conscitatory and the copy of my electronic Funds Withdrawal Conscitatory and the copy of my electronic Funds Withdrawal Conscitatory and the copy of my electronic Funds Withdrawal Conscitatory and the copy of	payments as shown on my return direct deposit refund amount on line 3 ent of the other spouse/RDP as an e provider to transmit my complete sclose to my ERO, intermediate service due return, I understand that if the FTB penalties. I acknowledge that I have ave selected a personal identification ent. 3 3 9 0 7 Do not enter all zeros
Your signature ► Shids Cur Date	e ► 10-11-2018
Spouse's/RDP's PIN: check one box only	
I authorize to enter my PIN	
ERO firm name	Do not enter all zeros
as my signature on my 2017 e-filed California individual income tax return.	20 1101 01101 011 20103
I will enter my PIN as my signature on my 2017 e-filed California individual income tax return. Check this PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.	s box only if you are entering your own
Spouse's/RDP's signature Date	e▶
Practitioner PIN Method Returns Only continue below	
Part III Certification and Authentication - Practitioner PIN Method Only	
	4 7 9 8 7 9 3 8
7, 0	o not enter all zeros
7, 0	indicated above.