Durable (Financial) Power of Attorney

I. PARTIES. On CREATION DATE, I, NAME OF PRINCIPAL, of PRINCIPAL'S STREET ADDRESS, PRINCIPAL'S CITY, PRINCIPAL'S STATE, PRINCIPAL'S ZIP CODE designate authority to NAME OF AGENT of AGENT'S STREET ADDRESS, AGENT'S CITY, AGENT'S STATE, AGENT'S ZIP CODE my attorney-at-fact (Hereinafter known as "Attorney-at-fact") to act in my name, as initialed below, for my benefit, hereby revoking any and all previous financial powers of attorney.

II. EFFECTIVE DATE

Choose the applicable paragraph by affixing your initials before the statement

I grant my Attorney-at-fact the necessary power immediately upon the execution of this document. The powers will not be affected by any possible incapacity or disability that I may face in the future.

I grant my Attorney-at-fact the necessary powers only when my attending physician decides that my current state is no longer capable of making financial decisions.

III. POWERS OF ATTORNEY-IN-FACT. My Attorney-at-fact will make decisions to further my best interests and welfare, as a fiduciary. My Attorney-at-fact will have the following powers:

(Please put your initials and mark the checkbox next to items)

PRINCIPAL'S INITIALS

PRINCIPAL'S INITIALS: BANKING? Able to deposit funds from financial institutions and to withdraw funds by check or to pay for goods, services, personal, and/or business transactions for my welfare. If necessary, my attorney-in-fact is authorized to execute banking documents that need to be signed.
PRINCIPAL'S INITIALS: SAFETY DEPOSIT BOX? .To access any safety deposit boxes under my name, wherever located, to remove all or some contents of the box, and to relinquish the ownership of the safety box.
PRINCIPAL'S INITIALS: LENDING? Able to make loans using my name, borrow money, individually or jointly; give promissory notes and other obligations; deposit or mortgage as collateral as security payment for all my securities, real estate, personal property, and whatever nature of the property owned by me or trusted in my benefit.
PRINCIPAL'S INITIALS: GOVERNMENT BENEFITS? Apply and receive government-mandated benefits that I am eligible for or become eligible for, including but not limited to, Social Security, Medicare, or Medicaid.
PRINCIPAL'S INITIALS: RETIREMENT PLAN? Contribute, select a payment option, roll-over, and receive benefits of any retirement plan or IRA to I own. However, my Attorney-at-fact does not have the power to change the beneficiary of my retirement plans or IRAs.
PRINCIPAL'S INITIALS: TAXES? To complete and sign any local, state, and federal tax returns on my behalf, pay taxes and assessments due and receive credits and refunds owed to me and to sign any necessary tax agency documents.

PRINCIPAL'S INITIALS:	INSURANCE? Purchase, pay premiums, and make
	on my behalf, such as life, health, automobile, and attorney-at-fact does not have the power to change my
	REAL ESTATE? - Able to acquire, purchase, s to sell, and sell certain real properties or interests on ttorney-at-fact deem proper.
purchase, exchange, lease, gra	PERSONAL PROPERTY? Able to acquire, ant options to sell, and sell certain personal properties or ns that my Attorney-at-fact deem proper.
improve, manage, invest, lease	MANAGEMENT OF PROPERTY Maintain, repair, e, rent, encumber, and deal with any real and personal intangible, for my benefit in conditions that my
(including the forgiveness of	GIFTS? - To make gifts, grants, or other transfers indebtedness and the completion of any charitable, either directly or in trust to such person(s) (including my
and pay for legal advice and to	LEGAL ADVICE AND PROCEEDINGS? - Acquire initiate or defend legal and administrative proceeding for ctions against third parties who refuse, without cause, to

IV. SPECIAL INSTRUCTIONS. Listed below are the additional special instructions limiting or extending the powers I grant to my Attorney-in-fact (Write "None" if there are no additional instructions necessary):

LIST OF SPECIAL INSTRUCTIONS

V. AUTHORITY OF ATTORNEY-IN-FACT. Any party dealing with my attorney-in-fact can trust and rely on the authority granted upon and does not need to look to the application of any proceeds not authority of the attorney-in-fact.

VI. LIABILITY OF ATTORNEY-IN-FACT. My Attorney-in-fact will not incur any liability to me as cited in this document except for a breach of fiduciary duty.

VII. REIMBURSEMENT OF ATTORNEY-IN-FACT. The attorney-in-fact is entitled to necessary reimbursement for reasonable expenses made in exercising the powers stated in this document. They are also entitled to reasonable compensation for their services.

VIII. AMENDMENT AND REVOCATION. I, the Principal, can change and revoke this power of attorney through a writing delivered to my attorney-at-fact. All changes or revocation is deemed ineffective as a third party until the third party is given notice.

IX. STATE LAW. This Power of Attorney is regulated and mandated by the laws of the State of STATE.

X. PHOTOCOPIES. Copies of this docuoriginal.	ument can be relied on as though they are the
Principal's Signature:	
Witness Acknow	wledgment Statement
We, the witnesses, hereby declare that the in our presence.	he principal signed and executed this document
Signature:	Signature:
Witness:	Witness:
Address:	Address:
Notar	y Statement
Attorney appeared before me and	, the principal of this Power of proved to me through government-issued as the above-named person, in my presence ged that the execution was done freely.

Notary Public:	
My commission expires:	