

POWER OF ATTORNEY

Notice: The powers granted by this document are broad and sweeping. They are defined in Connecticut Statutory Short Form Power of Attorney Act, sections 1-42 through 1-56, inclusive, of the General Statutes, which expressly permits the use of any other or different form of power of attorney desired by the parties concerned.

KNOW ALL MEN BY THESE PRESENTS, which are intended to constitute a GENERAL POWER OF ATTORNEY pursuant to Connecticut Statutory Sort Form Power of Attorney act:

That I, _____ (Name of person giving authority) do hereby appoint _____ (Name of person receiving authority) my attorney(s)-in-fact TO ACT;

First, in my name, place and stead in any way which I myself could do, if I were personally present, with respect to the following matters as each of them is defined in the Connecticut Statutory Short Form Power of Attorney Act to the extent that I am permitted by law to act through an agent;

Strike out and initial in the opposite box any one or more of the subdivisions as to which the principal does NOT desire to give the agent authority. Such elimination of any one or more subdivisions (A) to (L), inclusive, shall automatically constitute an elimination also of subdivision (M);

To strike out any subdivision the principal must draw a line through the text of that subdivision AND write his initials in the box opposite.

- | | |
|---|-----|
| (A) real estate transaction; (state address, attach description of property being sold & date of closing) | [] |
| (B) chattel and goods transactions; | [] |
| (C) bond, share and commodity transactions; | [] |
| (D) banking transactions; | [] |
| (E) business operating transactions; | [] |
| (F) insurance transactions; | [] |
| (G) estate transactions; | [] |
| (H) claims and litigation; | [] |
| (I) personal relationships and affairs; | [] |
| (J) benefits from military service; | [] |
| (K) records, reports and statements; | [] |
| (L) health care decisions; | [] |
| (M) all other matters; | [] |

(Special provisions and limitations may be included in the statutory short form power of attorney only if they conform to the requirements of the Connecticut Statutory Short Form Power of Attorney Act.)

Second, with fully and unqualified authority to delegate any or all of the foregoing powers to any person or persons whom my attorney-in-fact shall select.

Third, hereby ratifying and confirming all that said attorney(s) or substitute(s) do or cause to be done.

IN WITNESS WHEREOF, I have hereunto signed my name and affixed my seal this ____ day of _____, 20__.

Attested and subscribed in
the presence of the principal
and subsequent to the principal
subscribing same:

STATE OF

}

} ss:

Date

COUNTY OF

}

The foregoing Power of Attorney with provisions for Survival of Authority was acknowledged before me this ____ day of _____, 20__.

By _____

Commissioner of the Superior Court

Notary Public

My Commission Expires: _____

LEGAL DESCRIPTION