return to:	
Name: Company: Address: City: State: Zip: Phone: Fax:	
	Above this Line for Official Use Only

SPECIAL POWER OF ATTORNEY FOR CLOSING REAL ESTATE TRANSACTION

(Agent for Seller)

STATE OF MASSACHUSETTS
COUNTY OF
KNOW ALL MEN BY THESE PRESENT, THAT I, whose address is,
(State),(Zip), desiring to execute a SPECIAL POWER
OF ATTORNEY, hereby appoint,, of
County, Massachusetts, as my Attorney-in-Fact to act as
follows, GRANTING unto my Attorney-in-Fact full power to:
To do all things necessary to close on the sale of the property described below, commonly known as

The legal description of the property is as follows, to-wit:

[INSERT DESCRIPTION OR ATTACH EXHIBIT]

I hereby ratify and confirm all that said attorney-in-fact shall lawfully do or cause to be done by virtue of this Power of Attorney and the rights and powers herein granted.

All acts done by means of this power shall be done in my name, and all instruments and documents executed by my Attorney hereunder shall contain my name, followed by that of my attorney and the description "Attorney-in-Fact", excepting however any situation where local practice differs from the procedure set forth herein, in that event local practice may be followed. This SPECIAL POWER OF ATTORNEY shall be valid and may be relied upon by any third parties until such time as any revocation is recorded in the recorder's office of the county where the land is located.

DATED this the	day of		_, 20	
	Signatur Print Na		ne:	
State of Massachusett	ts			
County				
On this	day of	, 20	, before me personally (or)	
		Notary Public		
My commission expir	es:	Pri	int Name:	
Principal Name and Address		Atto	Attorney-in-Fact Name and Address	
Name:			Name:	
Address:		Add	ress:	
City:		City	•	
State:	Zip:	State	e: Zip:	
Phone:		Phor	Phone:	