When Recorded mail to:	
SPECIAL POWI	ER OF ATTORNEY
Principal	Attorney-In-Fact
Address	Address
City/County/State/Zip	City/County/State/Zip
	I, as Principal, do hereby make, constitute, and appoint y true and lawful Attorney-In-Fact and to do the following:
as m	y true and lawful / titoriney-in-fact and to do the following.
may hereafter acquire the legal right, power, or car from, or relating to any act or instrument stated abov or other assets only in the my best interest and that other assets for his/her benefit except as specifically	or, duty, right, or obligation whatsoever that I now have, or pacity to exercise or perform, in connection with, arising e. The Attorney-In-Fact shall use the my money, property, the Attorney-In-Fact shall not use my money, property, or described in detail and initialed by myself and Witnesses in is provision could subject the Attorney-In-Fact to criminal
in full force and effect on the date of execution of t	aid Attorney-In-Fact herein granted shall commence and be his document, and such rights, powers, and authority shall or terminated prior to such date by written ervator for me by a Court Order.
amounts, travel costs, lodging, meals, attorney or a	act to receive the following reimbursement for reasonable ccountant fees and the like:
Initial: Principal Witness	Witness

3. My Attorney-In-Fact receives gifting from the following programs through my qualification of those programs. I, as Principal of this Power of Attorney authorize annual exclusion gifting from these

programs to the Attorney-In-Fact Attorney.	as an entitlement rather tha	n as a reimbursement arising from this Power of
Initial: Principal	Witness	Witness
day ofauthority that I sign and execute the willingly direct another to sign for	and, being fi as instrument as my power of me, that I execute it as my	n my name to this power of attorney this rst duly sworn, do declare to the undersigned of attorney and that I sign it willingly, or free and voluntary act for the purposes expressed older, of sound mind and under no constraint or
	Principal	
	OATH AND VERIFI	CATION
personally appeared the above Pr whose name is subscribed to this	incipal, respectively, know instrument. We as Witness re appointed Attorney-In-Fa	re us, the undersigned Witness 1 and Witness 2, in to us or satisfactorily proven to be the person es to this Power of Attorney declare that neither ct, or the child or spouse of the Attorney-In-Fact
Principal's Power of Attorney ap executed it as Principal's free an Witnesses, in the presence of the I and that to the best of our knowle	pointing the above named d voluntary act for the purincipal, Notary and each cedge, the Principal was at	Principal signed and executed this instrument as Attorney-In-Fact and had signed willingly and proses therein expressed, and that each of the ther signed this Power of Attorney as Witnesses; the time an adult, of sound mind and under no sworn and acknowledged before us.
Witness 1		itness 2
Address	Ac	ldress
Principal	At	torney-In-Fact

On this of	
	, personally known to me or proved to me on the basis of
satisfactory evidence to be the above name	ed Principal whose name is subscribed to this instrument, and
<u> </u>	in front of myself and the above signed Witnesses. At the time of alt, of sound mind and under no constraint or undue influence.
Notary Public	(seal)