

## SPECIAL POWER OF ATTORNEY FOR CLOSING REAL ESTATE TRANSACTION

(Agent for Purchaser)

STATE OF KENTUCKY	
COUNTY OF	
KNOW ALL MEN BY THESE PRESENT	г, тнат і,
whose address is,,	(City),
(State),	_ (Zip), desiring to execute a SPECIAL
POWER OF ATTORNEY, hereby appoint	
County,	, as my Attorney-in-Fact to act as follows,
GRANTING unto my Attorney-in-Fact ful	l power to:
below, commonly known as (address), with full power and auth execute, acknowledge, and deliver effect the purchase and settlement including but not limited to, sales construments, deeds, deeds of trust, closing or settlement statements, et authority to pay any funds for the page of the	on the purchase of the property described  ority for me and in my name to sign, seal, and accept any and all documents necessary to on said property from the owner thereof, contracts and addendum thereto, negotiable or other instruments, disclosure statements, c. FURTHER GRANTING full power and ourchase and the execution of any and all , including, but not limited to notes, deeds of

Special Power of Attorney Page 1 of 3

The legal description of the property is as for	ollows, to-wit:	
See Legal Description Attached as Exhibit full	A incorporated by reference as though set forth in	
Legal Description:		
I hereby ratify and confirm all that said attodone by virtue of this Power of Attorney and	rney-in-fact shall lawfully do or cause to be d 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	
	Signature	
	Print Name:	

Special Power of Attorney Page **2** of **3** 

STATE OF KENTUCKY COUNTY OF		
The foregoing instrument was ac	cknowledged before me this	(name of
person acknowledged).	<i>y</i>	
	Notary Public	
	Printed Name:	
My Commission Expires:		

Principal Name and Address	Attorney-in-Fact Name and Address	
Name:	Name:	
Address:	Address:	
City:	City:	
State: Zip:	State: Zip:	
Phone:	Phone:	

Special Power of Attorney Page **3** of **3** 

## **EXHIBIT A**