

**MISSISSIPPI
POWER OF ATTORNEY
PACKAGE**

Control Number: MS-P024-PKG



U.S. Legal Forms™ thanks you for your purchase of a Power of Attorney Package. This package is an important tool to help you manage your finances and personal matters. The forms found in this package allow you to make decisions about your finances, healthcare, and the care of minor children

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I. FORM LIST

With your Power of Attorney package, you will find the state specific forms that will help you prepare for and protect yourself and your loved ones from events that may affect your health, finances and personal affairs.

Included in your package are the following forms:

- 1. Revocation of General Durable Power of Attorney
- 2. General Durable Power of Attorney
- 3. Power of Attorney for Care and Custody of Children
- 4. Advance Health Care Directive

II. DESCRIPTIONS OF FORMS

Brief descriptions of the forms contained in your U.S. Legal Forms™ Power of Attorney Package are found below.

Revocation of General Durable Power of Attorney – This is a Revocation of the Power of Attorney provided for in MS-P003, which allows you to appoint an attorney-in-fact (agent) to make decisions regarding property, financial, management, banking, business and other matters for you. Specific reference is made to the previously executed power of attorney and the date of its execution.

General Durable Power of Attorney - This General Durable Power of Attorney form is a general, durable power of attorney which is not affected by the principal's disability, incompetency or incapacity. You can use this form to appoint an attorney-in-fact (agent) to make decisions regarding healthcare, property, financial, management, banking, business and other matters for you. The powers granted to an Agent in this Power of Attorney are very broad.

Power of Attorney for Care and Custody of Children – This Power of Attorney is a form which provides for the appointment of an attorney-in-fact for the care of a child or children, including health care. This Power of Attorney form requires that the signature of the person giving another the power of attorney to be notarized.

Advance Health Care Directive – This is a statutory form provided in the Mississippi Code that allows you to give instructions about your own health care, name someone else to make health-care decisions for you and designate a physician to have primary responsibility for your health care. An adult or emancipated minor may provide instructions regarding their health care either orally or in writing and may execute a power of attorney for health care, which may authorize an agent to make any health-care decision the principal could have made while having capacity. The power must be in writing, dated, signed and either witnessed by at least two individuals (each of whom witnessed either the signing of the instrument by the principal or the principal's acknowledgement of the signature or of the instrument) or acknowledged before a notary public at any place within Mississippi.

If you need additional information, please visit www.uslegalforms.com and look up forms by subject matter. You may also wish to visit our legal definitions page at <http://definitions.uslegal.com/>

IV. TIPS ON COMPLETING THE FORMS

The form(s) in this packet may contain “form fields” created using Microsoft Word or Adobe Acrobat (“.pdf” format). “Form fields” facilitate completion of the forms using your computer. They do not limit your ability to print the form “in blank” and complete with a typewriter or by hand.

It is also helpful to be able to see the location of the form fields. Go to the View menu, click on Toolbars, and then select Forms. This will open the Forms toolbar. Look for the button on the Forms toolbar that resembles a shaded letter “a”. Click this button and the form fields will be visible.

By clicking on the appropriate form field, you will be able to enter the needed information. In some instances, the form field and the line will disappear after information is entered. In other cases, it will not. The form was created to function in this manner.

V. DISCLAIMER

These materials were developed by U.S. Legal Forms, Inc. based upon statutes and forms for the subject state. All information and Forms are subject to this Disclaimer:

All forms in this package are provided without any warranty, express or implied, as to their legal effect and completeness. Please use at your own risk. If you have a serious legal problem, we suggest that you consult an attorney in your state. U.S. Legal Forms, Inc. does not provide legal advice. The products offered by U.S. Legal Forms (USLF) are not a substitute for the advice of an attorney.

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