

Document Number:

**SPECIAL POWER OF ATTORNEYFOR  
CLOSING REAL ESTATE  
TRANSACTION**

Prepared by, recording requested by and  
return to:

Name: \_\_\_\_\_  
Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Fax: \_\_\_\_\_  
Parcel Identification Number:

-----Above this Line for Official Use Only-----

**SPECIAL POWER OF ATTORNEYFOR CLOSING REAL ESTATE  
TRANSACTION**  
(Agent for Seller)

STATE OF WISCONSIN  
COUNTY OF \_\_\_\_\_

KNOW ALL MEN BY THESE PRESENT, THAT I \_\_\_\_\_,  
whose address is \_\_\_\_\_,  
(City), \_\_\_\_\_ (State), \_\_\_\_\_ (Zip), desiring to  
execute a SPECIAL POWER OF ATTORNEY, hereby appoint,  
\_\_\_\_\_, of \_\_\_\_\_ County, Wisconsin, 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 \_\_\_\_\_ (address),  
with full power and authority for me and in my name to execute any and all  
documents necessary to effect the sale, conveyance and settlement on said  
property to any person or persons of his choosing, including but not limited to,  
deeds, checks, receipts, releases, warranties, affidavits, contracts, addenda,  
settlement statements, loan commitments and disclosure statements, truth-in-  
lending statements, all forms of commercial papers, endorsements to checks, or  
the like, and any such other instrument or instruments in writing of whatever kind,  
character and nature as may be necessary to complete the sale, financing  
arrangements, and the settlement process. FURTHER GRANTING full power

and authority to collect and receive any funds or proceeds of said sale in any manner which, in his sole discretion, he sees fit.

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\_\_\_\_\_.

\_\_\_\_\_  
Signature  
Print Name: \_\_\_\_\_

STATE OF WISCONSIN

COUNTY OF \_\_\_\_\_

The foregoing instrument was acknowledged before me on \_\_\_\_\_, (date) by \_\_\_\_\_  
(name(s) of person(s)).

\_\_\_\_\_  
Notary Public

(Seal, if any)

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: _____