

WYOMING
POWER OF ATTORNEY
PACKAGE

Control Number: WY-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

TABLE OF CONTENTS

- I. Form List with descriptions
- II. Descriptions of Forms
- III. Tips on Completing the Forms
- IV. Disclaimer

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. General Durable Power of Attorney for Property and Finances Effective Upon Disability
- 2. General Durable Power of Attorney for Property and Finances Effective Immediately
- 3. Power of Attorney for Care and Custody of Children
- 4. Statutory 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.

General Durable Power of Attorney for Property and Finances Effective Upon Disability – This General Durable Power of Attorney for Property and Finances Effective upon Disability form is a general, durable power of attorney which is effective ONLY upon the principal's disability, incompetency or incapacity. This form allows you to appoint an attorney-in-fact (agent) to make

decisions regarding property, financial, business, banking, management and other matters for you. The powers granted to an Agent in this Power of Attorney are very broad, but do NOT provide for health care services.

General Durable Power of Attorney for Property and Finances Effective Immediately - This General Durable Power of Attorney is a general, durable power of attorney which is effective IMMEDIATELY. This form allows you to appoint an attorney-in-fact (agent) to make decisions regarding property, financial, business, banking, management and other matters for you. The powers granted to an Agent in this Power of Attorney are very broad, but do NOT provide for health care services. This form complies with all applicable state statutory laws.

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.

Statutory Advance Health Care Directive – This Statutory Living Will form allows you to express your wishes and desires if it is determined that your death will occur whether or not life-sustaining procedures are utilized and where the application of life-sustaining procedures would serve only to artificially prolong the dying process. It is a declaration that such procedures be withheld or withdrawn, and that you be permitted to die naturally with only the administration of medication or the performance of any medical procedure deemed necessary to provide you with comfortable care.

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.

THESE MATERIALS ARE PROVIDED "AS IS" WITHOUT ANY EXPRESS OR IMPLIED WARRANTY OF ANY KIND INCLUDING WARRANTIES OF MERCHANTABILITY, NONINFRINGEMENT OF INTELLECTUAL PROPERTY, OR FITNESS FOR ANY PARTICULAR PURPOSE. IN NO EVENT SHALL U.S. LEGAL FORMS, INC. OR ITS AGENTS OR OFFICERS BE LIABLE FOR ANY DAMAGES WHATSOEVER (INCLUDING WITHOUT LIMITATION DAMAGES FOR LOSS OR PROFITS, BUSINESS INTERRUPTION, LOSS OF INFORMATION) ARISING OUT OF THE USE OF OR INABILITY TO USE THE MATERIALS, EVEN IF U.S. LEGAL FORMS, INC. HAS BEEN ADVISED OF THE POSSIBILITY OF SUCH DAMAGES.