

POWER OF ATTORNEY QUESTIONNAIRE

Selection of Your Representative (Agent):

I choose the following person to act as my representative to make financial decisions for me. (If married, usually spouse. If there is an actual disagreement between your agent and your alternate agent, this agent would be priority.):

Full Legal Name: _____

Address: _____

City: _____ **State:** _____ **ZIP:** _____

Cell: _____ **Work:** _____ **Home:** _____

I choose the following person to act as my alternate representative to make financial decisions for me. (Optional. If there is an actual disagreement between your agents, this agent would be secondary.):

Full Legal Name: _____

Address: _____

City: _____ **State:** _____ **ZIP:** _____

Cell: _____ **Work:** _____ **Home:** _____

Scope and Extent of Powers Granted by the General Power of Attorney (Initial any of the following):

_____ Personal Finances: This gives your Agent the ability to withdraw and deposit funds from bank accounts belonging to you, to enter and remove contents of all safe deposit boxes rented by you, receive money owed or belonging to you, loan money on your behalf, etc.

_____ Real Property: This gives your Agent the ability to purchase real property on your behalf or sell, lease, subdivide, convey, mortgage, litigate, insure, transfer, encumber, etc. any interest you have in real property.

_____ Personal Property: This gives your Agent the ability to buy personal property on your behalf or sell, exchange, transfer, litigate, insure, encumber, etc. your personal property.

_____ Business Transactions: This gives your Agent the ability to sign and execute any vote, approval, opposition, termination, investment, disposition,

lease, indemnity, agreement, bill of sale, bond, check, release, etc. on your behalf for any of your business interest/decisions you may have.

_____ To Do and Perform Every and All Acts Required: This is the catch all for your Agent to cover all necessary or appropriate actions which you would do if personally present, and not otherwise specifically outlined in your General Power of Attorney.

_____ Other (*Please explain in detail*):

Specific Exclusions You Would Like Contained in the General Power of Attorney (*Explain or write "not applicable"*):

Please indicate if you are interested in obtaining more information on any of the following additional forms:

- _____ Will
- _____ Advanced Medical Directive
- _____ Other Estate Planning Information: _____