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FINANCIAL DURABLE GENERAL POWER OF ATTORNEY

Advisory Notice to Agent: ARS § 14-5506 governs the exercise of powers of attorney. Under that statute, an agent cannot receive ANY benefits from the principal unless those benefits are specifically identified in detail within this instrument or within a written contract. Otherwise, the agent could be subject to criminal prosecution or subject to the penalty provisions of ARS § 46-456, which authorizes the loss of the agent's right to inherit from the principal as well as payment of treble damages and attorneys' fees. An agent should carefully review these statutes or consult with a knowledgeable attorney prior to exercising the authority granted by this power of attorney.

ARTICLE ONE GRANT OF POWERS

I,	the	undersigned	principal,			currently	residing	at
				, hereby	appoint _	•		_,
curren	tly re	siding at				, (herei	nafter referre	d
the Agname,	gent w place	vere the absolute, and stead as e	te owner of my	hereby granting assets and liab ded below as ful	the Agent full this ilities, to perfo	l power and authorm those acts for erform if persona	me and in m	ıy
	TH	IS DOCUME	NT AND SI		BE AFFECT	CTIVE AS OF 'ED BY MY I		
ackno	g the wledg	witness to place	ce his or her in has reviewed a	itials below my	initials for each	d power set forth ch selected power e delegation here	the princip	al
persor	y, or e nal, tar	exercise any op ngible and inta	tion, election, p	privilege or pow or without the S	er with respectate of Arizona	encumber, assign, t to any or all pro a, as the Agent in ich I would othery	perty, real ar his or her so	nd le
		Initials:	Principal		Witness			

2. Power with Respect to Bank Accounts. To establish accounts of all kinds, including, without limitation, checking and savings accounts, for me with financial institutions of any kind, including banks and other similar financial institutions; to modify, terminate, make deposits to or write checks on or make withdrawals from and grant security interests in all accounts in my name or with respect to which I am an authorized signatory (except any accounts held by me in a fiduciary capacity), whether or not such account was established by me or for me by the Agent, to negotiate, endorse or transfer any checks or other instruments with respect to any such accounts; and to contract for any services rendered by any

bank or financial institution	n.		
Initials:			
	Principal	Witness	
maintenance of a safe dep with respect to which I am was executed by me (eith	posit box in my name; to an authorized signatory are alone or jointly with	sit Boxes. To contract with on have access to all safe depay, whether or not the contract of others) or by the Agent in sit box and to terminate any	posit boxes in my name or t for such safe deposit box a my name; to add to and
Initials:		****	
	Principal	Witness	
sums of money which are to me, whether social sec interests, annuities, debts,	or shall become due, over curity benefits, pension or any other receivables	ving or payable to me, or who payments, individual retirements, and to use all lawful ways a actions, claims or proceeding	ich belong or shall belong ment accounts, dividends, and means in my name for
Initials:			
	Principal	Witness	
purchases and sales (included other securities, or limit negotiable form, issued of (including commodity fut third party securities for account(s) to any other broaccount(s) to any other broaccount any third party transfer any stocks, bonds and to execute any docutransactions made for my calls for margin, or other	ading short sales), to sued partnership interests or unissued, foreign excures), on margin or other my account(s), and to incorporate to make payment of ments therefrom payables, options or other securements necessary to efaccount(s); (f) to approve the demands with references.	t to any account with any brabscribe for and to trade in sor investments and trust change, commodities, and crivise, for my account(s) and instruct any third party to dis, and in such name and form moneys from my account(s) the to me or to others; (d) to rities of any nature, at any the fectuate the foregoing; (e) we and confirm the same, to rince to my account(s); and ereto for me and on my behalong	stocks, bonds, options, or units, whether or not in contracts relating to same drisk; (b) to deliver to any deliver securities from my as the Agent may direct; with any third party, and sell, assign, endorse and ime standing in my name to receive statements of eceive any and all notices, (g) to make any and all
Initials:			
	Principal	Witness	
6. Employ Co investment and legal advis		, compensate and terminate	the services of financial,
Initials:			
	Principal	Witness	

7. Power with Respect to Insurance. To purchase, maintain, surrender, collect or cancel (a)
life insurance or annuities of any kind on my life or the life of any one in whom I have an insurable
interest, (b) liability insurance protecting me and my estate against third party claims, (c) hospital
insurance, medical insurance, Medicare supplement insurance, custodial care insurance, and disability
income insurance for me or any of my dependents, and (d) casualty insurance insuring assets of mine
against loss or damage due to fire, theft, or other commonly insured risk; to pay all insurance premiums,
to select any options under such policies, to increase coverage under any such policy, to borrow against
any such policy, to pursue all insurance claims on my behalf, to adjust insurance losses; and the
foregoing powers shall apply to private and public plans, including, without limitation, Medicare,
Medicaid, and Workers' Compensation.
Initials:
Principal Witness
8. Power to Provide for Principal's Support. To do all acts necessary for maintaining my
customary standard of living, to provide living quarters by purchase, lease or other arrangement, or by
payment of the operating costs of my existing living quarters, including interest, amortization payments,
repairs and taxes, to provide normal domestic help for the operation of my household, to provide
clothing, transportation, medicine, food and incidentals, and if necessary to make all necessary
arrangements, contractual or otherwise, for me at any hospital, hospice, nursing home, convalescent
home or similar establishment, or in my own residence should I desire it, and to assure that all of my
essential needs are provided for at such a facility or in my own residence, as the case may be.
Initials:
Principal Witness
O Income Town Determine Towns and file and follows for death and believe the automates
9. Income Tax Returns. To prepare and file any federal, state or local income tax return on
my behalf and to deal with any governmental agency with respect to any of my tax returns.
Initials:
Principal Witness
i inicipal witness
10. Nomination of Guardian/Conservator. While I hope that by executing this
instrument I will have obviated the need for a guardianship and conservatorship of my person and of my
estate, if it should become necessary for a guardian or conservator to be appointed for my person or for
my estate, I nominate the Agent to so serve.
my estate, I nonmate the Agent to so serve.
11. Alternate Agents. If the Agent designated in the introductory paragraph of Article One
above cannot serve or continue to serve or is unavailable to serve, I appoint
, to serve as my Alternate Agent ("Alternate Agent"). No
Alternate Agent shall be liable for any act or omission of the initial Agent.
Thermace rigent shall be made for any act of dimension of the initial rigent.
12. Benefit to Agent. My agent shall be entitled to reasonable compensation for any services
provided as my Agent, which compensation shall be up to \$ per hour. My agent shall be
entitled to reimbursement of all reasonable expenses incurred as a result of carrying out any provision of
Providence of the providence o

this Power of Attorney.		
Initials:		
	Principal	Witness
in the Agent a general p	power of appointn	ent. Nothing in this instrument shall be construed as creating nent exercisable in its own behalf, or for the benefit of the ditors of the estate of the Agent.
14. Limitations of any will or codicil.	on Authority. Th	e Agent shall not have any power to amend, alter, or revoke
general or limited, previous thereunder, including, we any, except any powers write checks or deposit f	ously granted by n ithout limitation, a granted by me on unds to or withdra	f Attorney. I hereby revoke all powers of attorney, whether he as principal and terminate all agency relationships created those relationships of all successor agents named therein, if forms provided by financial institutions granting the right to aw funds from accounts to which I am a signatory or granting reby revoked, but shall continue to be in full force and effect.
any such act done by the which I am disabled, in- whether I am dead or all bind me, my guardian, h	e Agent at any tin competent or inca ive, shall, unless of eirs, distributees,	pprove any act or failure to act of the Agent in good faith and ne, including but not limited to, any act done at any time at pacitated or at any time at which there is uncertainty as to otherwise invalid or unenforceable, have the same effect and legatees, devisees, assignees, and personal representatives to not disabled, incapacitated, or incompetent at the time of such
in reasonable reliance or that time has elapsed sin instrument. Persons and	this power of att ce its execution prentities shall place	person or entity acting without negligence and in good faith forney shall not incur any liability thereby, nor shall the fact revent such persons or entity from reasonably relying on this be reasonable reliance on this power of attorney regardless of any request the issuance of an affidavit by the Agent on which
18. Governing Law respects.	v. The laws of th	e State of Arizona shall govern this power of attorney in all
undersigned authority that	at I sign and execu	, the principal, sign my name to this Financial Durable, 20, and being first duly sworn, do declare to the atte this instrument as my Power of Attorney and that I sign it in for me, that I execute it as my free and voluntary act for the

	incipal
foregoing Financial Durable General Poundersigned authority that the principa attorney and that he/she signed it willisigned this power of attorney as a witne	, the witness, sign my name to the ower of Attorney being first duly sworn and I do declare to the I has signed and executed this instrument as his/ her power of ingly, and that I, in the presence and hearing of the principal, ss to the principal's signing and that to the best of my knowledge older, of sound mind and under no constraint or undue influence.
Dated:	Signature of Witness
	Printed Name of Witness
STATE OF ARIZONA) ss. County of)	