

# *UnWrap This* **PROBATE**

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## GENERAL DURABLE POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS that I, \_\_\_\_\_ of \_\_\_\_\_, County of \_\_\_\_\_, State of \_\_\_\_\_, do hereby make, constitute and appoint \_\_\_\_\_ of \_\_\_\_\_, County of \_\_\_\_\_, State of \_\_\_\_\_, my true and lawful attorney for me and in my name, place and stead, generally to act as my agent or attorney in fact in relation to all matters in which I may be interested or concerned, not including matters about which I have authorized my Health Care Agent to make decisions, and as such to do all acts and things and to execute all instruments as fully and effectually in all respects as I myself could do if personally present, excepting only such acts and things as the law of the place where they are to be done (including the conflicts of law rules) or their nature would make impossible, it being my intention, regardless of the mention hereafter of any powers which may be specifically included in this general power, to make this a full, complete and general power of attorney. This power of attorney shall not be affected by my subsequent disability or incapacity.

I give unto my said attorney in fact full authority and power to do whatsoever is requisite and necessary to be done in the foregoing, as fully as I could if personally present, with full power of substitution, hereby ratifying and confirming all that my said attorney or his substitute shall lawfully do, or cause to be done by virtue hereof.

It is my specific intent that the attorney appointed under this power take whatever actions he may deem necessary or desirable to provide for my wellbeing, including without limitation my housing. I also include in the aforesaid general power, without in any way limiting its generality, the power to exercise general control and supervision over all my property, both real and personal, wherever situated; to collect all dividends, interest, rents and other income; and to deposit and withdraw monies in any accounts at any bank or trust company.

I covenant for myself, my heirs, executors, and assigns to hold said attorney harmless from any liability for any acts, otherwise proper, performed under this power after my death or other incapacity may have revoked it, so long as such acts are performed by said attorney in good faith and in the belief that this power is still in effect and my said attorney shall not be deemed to have acted in bad faith merely because of doubts raised by unconfirmed reports of my death or other incapacity.

Specifically, and without in any way limiting the generality of the foregoing, I give my said attorney the authority:

- To transfer, convey and deliver any and all of my property, real and personal, and to do all things necessary or convenient to accomplish the same, including without limitation the power to sign, seal, execute and deliver deeds, bills of sale, and stock powers;
- To receive, endorse, collect, negotiate and deposit checks payable to my order, including Social Security checks and other checks drawn on the Treasurer of the United States, and

to give full discharge for the same, and to draw checks and withdrawal orders on any checking or savings account or certificate standing in my name;

- To collect any and all claims and demands of every nature and description which I may now or hereafter have and to prosecute and defend any lawsuits involving me or my property and to adjust by compromise or arbitration any claims in my favor or against me;
- To execute and file any and all income and other tax returns and declarations of estimated tax required to be filed by me, to receive any tax refund due me, to receive any communications with respect to any tax, and to appear for me and represent me before the United States Treasury Department and any state or municipal or other agency in connection with any matter involving federal, state or local taxes;
- To enter any safe deposit box standing in my name alone or jointly with any other person, to remove any or all of the contents thereof, and to close any such box;
- To assign or surrender any life insurance policies I may own;
- To make charitable gifts on my behalf; and
- To take any other actions which my said attorney may, in her sole discretion, deem necessary or appropriate for the management of my financial affairs or for the financial well-being of me or my family.

I hereby give my said attorney-in-fact full authority and power to do everything whatsoever requisite or necessary to accomplish the foregoing, as fully as I could or might do if personally present, and ratify and confirm all that said attorneys-in-fact shall lawfully do by virtue hereof, it being my intention to make this power as general and complete as possible.

Wherever in the above document the pronoun "he" or "his" is used it shall apply to the feminine gender where appropriate.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this \_\_\_\_\_  
day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_

COMMONWEALTH OF MASSACHUSETTS

County of \_\_\_\_\_, ss.

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_, before me, \_\_\_\_\_, the  
undersigned notary public, personally appeared \_\_\_\_\_

(name of document signer), proved to me though satisfactory evidence of identification, which

was \_\_\_\_\_, to be the person whose name was

signed on the preceding attached document in my presence.

\_\_\_\_\_  
Official Signature of Notary Public

\_\_\_\_\_  
Printed Name of Notary

My Commission Expires: \_\_\_\_\_