MIGHIGAN STATUTORY POWER OF ATTORNEY

DESIGNATION OF AGENT

I	name the following person as my agent:		
(Name of Principal)			
Agent's Address:			
Agent's Telephone Number:			
DESIGNATION OF SUCCESSOR	AGENT(S) (OPTIONAL)		
If my agent is unable or unwilling to	act for me, I name as my successor agent:		
Name of Successor Agent:			
Consessor Amerita Address.			
	per:		
	unwilling to act for me, I name as my second successor agent:		
Name of Second Successor Agent:			
Agent's Address:			
Second Successor Agent's Telepho			
GRANT OF GENERAL AUTHORIT	Y		
	agent general authority to act for me with respect to the uniform power of attorney act, MCL 556.201 to 556.505:		
	o include in the agent's general authority. If you wish to e subjects, you may simply initial "All Preceding Subjects.")		
Real Property	Tangible Personal Property		
Stocks and Bonds	Commodities and Options		
Banks and Other Financial Ins	stitutions Operation of Entity or Business		
Insurance and Annuities	Estates, Trusts, and Other Beneficial Interests		
Claims and Litigation	Personal and Family Maintenance		
Retirement Plans	Taxes		
Benefits from Governmental F	Benefits from Governmental Programs or Civil or Military Service		
All Preceding Subjects (regardless of whether any of the preceding subjects are initialed)			

GRANT OF SPECIFIC AUTHORITY (OPTIONAL)

My agent MAY NOT do any of the following specific acts for me UNLESS I have INITIALED the specific authority listed below:

CAUTION! Granting any of the following will give your agent the authority to take actions that could significantly reduce your property or change how your property is distributed at your death. Furthermore, depending on the amount in one or more of the accounts mentioned in the last item listed below (which refers to 31 CFR 1010.350), granting that particular power may subject your agent to burdensome federal reporting obligations that are subject to stiff penalties. INITIAL ONLY the specific authority you WANT to give your agent. If you have questions about the wisdom of granting any specific authority to your agent, you should seek legal advice before signing this form. If you are inclined to grant specific authority but doubt the wisdom of granting that authority to a particular person you have designated as your agent or successor agent, you should ask yourself whether you have designated the right person(s).

 _ Create, amend, revoke, or terminate an inter vivos trust
 Make a gift as limited by section 217 of the uniform power of attorney act, MCL 556.317, and any special instructions in this power of attorney
_ Create or change rights of survivorship by, for example, creating a joint account
_ Create or change a beneficiary designation
_Authorize another person to exercise the authority granted under this power of attorney
_ Waive the principal's right to be a beneficiary of a joint and survivor annuity, including a survivor benefit under a retirement plan
 _ Exercise fiduciary powers that the principal has authority to delegate
 _Access the content of electronic communications
 Exercise authority over any "bank, securities, or other financial account in a foreign country" within the meaning of 31 CFR 1010.350

LIMITATION ON AGENT'S AUTHORITY

Even if I have authorized my agent to make a gift (by initialing the relevant line above), an agent who is not my ancestor, spouse, or descendant MAY NOT use my property to benefit the agent or a person to whom the agent owes an obligation of support unless I have included that authority in the Special Instructions.

SPECIAL INSTRUCTIONS (OPTIONAL)

You may give special instructions on the following lines.
CAUTION! Special instructions are liable to cause ambiguities that may impair the effectiveness of this power of attorney. You are taking a solemn step if you decide to make any use of this form without seeking legal advice; you should be especially wary of providing special instructions without the benefit of legal counsel.
EFFECTIVE DATE
This power of attorney is effective immediately unless I have stated otherwise in the Special Instructions.
NOMINATION OF CONSERVATOR OR GUARDIAN (OPTIONAL)
If it becomes necessary for a court to appoint a conservator or guardian of my estate or guardian of my person, I nominate the following person(s) for appointment:
Name of Nominee for Conservator or Guardian of My Estate:
Nominee's Address:
Nominee's Telephone Number:
Name of Nominee for Guardian of My Person:
Nominee's Address:
Nominee's Telephone Number:

RELIANCE ON THIS POWER OF ATTORNEY

Any person, including my agent, may rely upon the validity of this power of attorney or a copy of it unless that person knows that the power has terminated or is invalid.

SIGNATURE OF PRINCIPAL, SIGNATURES OF WITNESSES, AND ACKNOWLEDGMENT

CAUTION! Unless you provide otherwise in the Special Instructions, this form will create a "durable" power of attorney if you sign it either before a notary public (or other individual authorized to take acknowledgments) or in the presence of two witnesses neither of whom is designated as your agent or successor agent, both of whom sign below (and one of whom may be the notary public or other individual authorized by law to take acknowledgments who also signs below in his or her official capacity). The power's being "durable" means that unless the power is revoked or the agent's authority is otherwise terminated beforehand, your agent's authority will continue during any period in which you are alive but incapacitated. If you have questions about the wisdom of making this power durable, you should seek legal advice before signing this form.

CAUTION! You have an important motivation to acknowledge your signature before a notary public (or other individual authorized to take acknowledgments) regardless of the question of durability (described above): doing so will make it harder, under section 120 of the uniform power of attorney act, MCL 556.220, for someone to whom the power is presented to decline to accept the power and your agent's authority to act on your behalf.

Date	
Your Name Printed	Your Signature
Your Address	Your Telephone Number
Date	
Witness No. 1's Name Printed	Witness No. 1's Signature
Witness No. 1's Address	
Date	
Witness No. 2's Name Printed	Witness No. 2's Signature
Witness No. 2's Address	
This document was acknowledged before me on	Date .
(Seal, if any)	Notary of the public signature
My commission expires on	 Name of Pincipal
Notary public, State of,	. County of