1. General Durable Power of Attorney   
   of {{ client.name }}

I, {{ client.name }} of {{ address.city }}, Indiana, social security number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, am creating a durable power of attorney under the laws of the State of Indiana. I hereby revoke all Powers of Attorney previously granted by me as Principal and terminate all Agency relationships created by me except:

Powers granted by me on forms provided by financial institutions granting the right to write checks on, deposit funds to and withdraw funds from accounts to which I am a signatory; and

Powers granting access to a safe deposit box.

## Appointment of Agent

{%p if dp\_number\_c == 1 %}

I, {{ client.name }} of {{ address.city }}, Indiana, designate {{ dpoagentsclient[0].name }} as my attorney-in-fact (subsequently called “Agent”).

{%p elif dp\_number\_c == 2 %}

I, {{ client.name }} of {{ address.city }}, Indiana, designate {{ dpoagentsclient[0].name }} as my attorney-in-fact (subsequently called “Agent”).

If {{ dpoagentsclient[0].name }} is unable or unwilling to serve or to continue to serve, I appoint {{ dpoagentsclient[1].name }}, to serve as substitute or successor Agent.

{%p else %}

I, {{ client.name }} of {{ address.city }}, Indiana, designate {{ dpoagentsclient[0].name }} as my attorney-in-fact (subsequently called “Agent”).

If {{ dpoagentsclient[0].name }} is unable or unwilling to serve or to continue to serve, I appoint the following persons to serve as consecutive substitute or successor Agents and who shall serve in the order specified below:

{%p for agent in add\_separators(dpoagentsclient[1:], separator=‘, Alternate’, last\_separator=‘, Alternate’, end\_mark=‘, Alternate’) %}

{{ agent }}

{%p endfor %}

If any substitute or successor Agent shall be unable or unwilling or unavailable to serve or to continue to serve as my Agent, the next substitute or successor Agent named above shall serve as my Agent. Any substitute or successor Agent may execute and deliver an affidavit that my initial Agent and all prior named substitute or successor Agents are unwilling or unable to serve or to continue to serve and such affidavit shall be conclusive evidence insofar as third parties are concerned of the facts set forth therein, and in such event any person acting in reliance upon such affidavit shall incur no liability to my estate because of such reliance.

{%p endif %}

## Prior or Joint Agent Unable to Act

A successor or joint Agent may establish that a prior or joint Agent is no longer able to act by himself or herself, by (the successor or joint Agent’s) affidavit that the other Agent is not available or is incapable of acting. The affidavit may but need not be supported by a death certificate of the other Agent, a certificate showing that a guardian or conservator has been appointed for the Agent, a letter from a physician stating that the Agent is not capable of managing his or her own affairs, or a letter from the Agent stating unwillingness to act or delegation to the successor Agent.

## Liability of Agent

My Agent and my Agent’s estate, heirs, successors and assigns, are hereby released and discharged from any and all liability (civil, criminal, administrative or disciplinary) and from all claims or demand of all kinds by me, my estate, my heirs, successors and assigns, arising out of the acts or omissions of my Agent, except for willful misconduct or gross negligence of my Agent. It is my intent to protect my Agent from any claims or liability so long as my Agent acts in good faith, even though such actions may later be determined to be simple negligence.

## Agent Compensation

My Agent shall be entitled to reasonable compensation for the services rendered in the execution of any of the powers conferred by me in this Power. The factors that should be taken into account in determining the amount of compensation shall be the time expended by Agent, the value of the property over which Agent exercises control and management, and the complexity of the transaction entered into by Agent in functioning under this Power. Agent may make the payment of such amount from my assets every year, and shall keep records that include the amount of time spent in performing the services, a description of the services performed, and the amount of compensation paid to himself or herself for each such time period.

However, if my Agent is a bank or trust company, such Agent shall be entitled to compensation based upon its published fee schedule in effect at the time the services are rendered or as otherwise agreed.

In addition, my Agent shall be entitled to reimbursement for all reasonable expenses incurred as a result of carrying out any provision or power of this document.

## Effectiveness of Durable Power of Attorney

This *General Durable Power of Attorney* shall be effective as of the date it is signed.

## Powers

I give to my Agent or any successor Agent the powers specified in this section to be used on my behalf, provided that my Agent shall not have any power which would cause my Agent to be treated as the owner of any interest in my property.

### Real Property

Authority with respect to real property transactions pursuant to I.C. §30-5-5-2.

### Tangible Personal Property

Authority with respect to tangible personal property pursuant to I.C. §30-5-5-3.

### Bond, Share and Commodity

Authority with respect to bond, share and commodity transactions pursuant to I.C. §30-5-5-4.

### Retirement Plans

Authority with respect to retirement plans pursuant to I.C §30-5-5-4.5.

### Banking

Authority with respect to banking transactions pursuant to I.C. §30-5-5-5.

### Business

Authority with respect to business operating transactions pursuant to I.C. §30-5-5-6.

### Insurance

Authority with respect to insurance transactions pursuant to I.C. §30-5-5-7..

### Beneficiary

Authority with respect to beneficiary transactions pursuant to I.C. §30-5-5-8.

### Gifts

Authority with respect to gift transactions pursuant to I.C. §30-5-5-9.

### Fiduciary

Authority with respect to fiduciary transactions pursuant to I.C. §30-5-5-10.

### Claims and Litigation

Authority with respect to claims and litigation pursuant to I.C. §30-5-5-11.

### Family Maintenance

Authority with respect to family maintenance pursuant to I.C. §30-5-5-12.

### Military Service

Authority with respect to benefits from military service pursuant to I.C. §30-5-5-13.

### Records, Reports and Statements

Authority with respect to records, reports and statements pursuant to I.C. §30-5-5-14, including the power to execute on my behalf any specific power of attorney required by any taxing authority to allow my attorney-in-fact to act on my behalf before that taxing authority on any return or issue.

### Estate Transactions

Authority with respect to estate transactions pursuant to I.C. §30-5-5-15.

### Health Care

Authority with respect to health care pursuant to I.C. §30-5-5-16.

### Health Care Representative Appointment with Power to Stop Health Care

I appoint my Agent as my health care representative with authority to act for me in all matters of health care in accordance with I.C. §16-36-1 as shown by the appointment under I.C. §16-36-1 which is attached to this power of attorney pursuant to I.C. §30-5-5-16(b)(2) and I.C. §30-5-5-17.

### Delegate

Authority with respect to delegating authority pursuant to I.C. §30-5-5-18.

### Transfer to Revocable Trust

Authority to transfer any assets to any revocable trust created by me.

### Disclaimer

Authority to disclaim any interest in any property which I would otherwise succeed, as provided in I.C. §32-3-2-2.

### All Other Matters

Authority with respect to all other matters pursuant to I.C. §30-5-5-19.

## Nomination of Guardian

If a proceeding is ever brought to appoint a guardian of my estate, I request that the court having jurisdiction appoint my Agent (or an acting successor Agent) as such guardian. If protective proceedings are instituted on my behalf, I request that my Agent (or an acting Agent) be appointed to act on my behalf.

## Removal of Assets from Revocable Trust

My Agent may remove any of my assets from any revocable trust that I have created, whether in existence at the time I execute this *General Durable Power of Attorney* or whether later created by me, to the extent necessary or appropriate for the implementation of any other power granted to my Agent under this *General Durable Power of Attorney.*

## Durable Power of Attorney not Affected by Subsequent Disability

This *General Durable Power of Attorney* is not affected by my subsequent incapacity and shall remain in full force and effect until revoked by me or upon my death, whichever occurs first. Notwithstanding the foregoing, pursuant to I.C. §30-5-9-2(c) my death shall not revoke or terminate the authority granted my Agent under I.C. §30-5-5-16(b)(5) through I.C. §30-5-5-16(b)(7).

## Explanation

I understand that this *General Durable Power of Attorney* is an important legal document. Before executing this document, my attorney explained to me the following:

This document provides my Agent with broad powers to dispose, sell, convey, and encumber my real and personal property;

The powers granted in this *General Durable Power of Attorney* will exist for an indefinite period of time unless I limit their duration by the terms of this *General Durable Power of Attorney* or revoke this *General Durable Power of Attorney.* These powers will continue to exist notwithstanding my subsequent disability or incapacity; and,

I have the right to revoke or terminate this *General Durable Power of Attorney* at any time.

## Severability

If any provision of this power of attorney is declared to be invalid for any reason, such invalidity shall not affect the remaining provisions of this document. The remaining provisions shall remain in full force and effect.

## Governing law

This instrument shall be governed by the laws of the state of Indiana in all respects, including its validity, construction, interpretation and termination. To the extent permitted by law, this power of attorney shall be applicable to all property of mine, real, personal, intangible or mixed, wherever and in whatever state of the United States or foreign country the situs of such property is at any time located, and whether such property is now owned by me or hereafter acquired by me or for me by my Agent.

## Signature of Agent

My Agent shall use the following form when signing on my behalf pursuant to this *General Durable Power of Attorney*: {{ client.name }} by [enter Agent’s name], {{ client.pronoun\_possessive(‘Agent’) }}.

**IN WITNESS WHEREOF**, I have executed this *General Durable Power of Attorney* and I have directed that photographic copies of this power be made, which shall have the same force and effect as the original.

Dated this \_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_, 20\_\_\_.

{{ client.name }}, Principal

{{ address.address }},

{{ address.city }}, {{ address.state }} {{ address.zip }}

Social Security Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

STATE OF INDIANA )

) ss.

COUNTY OF {{ county }} )

This instrument was acknowledged before me on \_\_\_\_\_\_\_\_\_\_ \_\_\_, 20\_\_\_, by {{ client.name }}, as Principal.

Notary Public

My commission expires: \_\_\_/\_\_\_/20\_\_\_