## KANSAS DURABLE POWER OF ATTORNEY

NOTICE: THE POWERS GRANTED BY THIS DOCUMENT ARE BROAD AND SWEEPING. THEY ARE EXPLAINED IN THE KANSAS POWER OF ATTORNEY ACT. IF YOU HAVE ANY QUESTIONS ABOUT THESE POWERS, OBTAIN COMPETENT LEGAL ADVICE. THIS DOCUMENT DOES NOT AUTHORIZE ANYONE TO MAKE MEDICAL AND OTHER HEALTHCARE DECISIONS FOR YOU. YOU MAY REVOKE THIS POWER OF ATTORNEY IF YOU LATER WISH TO DO SO. THIS POWER OF ATTORNEY IS EFFECTIVE IMMEDIATELY AND WILL CONTINUE TO BE EFFECTIVE EVEN IF YOU BECOME DISABLED, INCAPACITATED, OR INCOMPETENT.

Pursuant to K.S.A. 58-652(2), this is a durable power of attorney and the authority of my attorney-in-fact,

when effective, shall not terminate or be void or voidable if I am or become disabled or in the event of later uncertainty as to whether I am dead or alive.
(Check if applicable. Strike out if not.)
☐ I hereby give notice that I have revoked, and do hereby revoke, any previous power of attorney given or empowering another agent to act as my true and lawful attorney in fact. I declare that all power and authority granted under said power of attorney is hereby revoked and withdrawn.
I, (your name),(address) appoint (name of the person appointed) (address) as my Agent (attorney in fact) to act for me in any lawful way with respect to the following initialed subjects:
TO GRANT ALL OF THE FOLLOWING POWERS, INITIAL THE LINE IN FRONT OF (N) AND IGNORE THE LINES IN FRONT OF THE OTHER POWERS.
TO GRANT ONE OR MORE, BUT FEWER THAN ALL, OF THE FOLLOWING POWERS, INITIAL THE LINE IN FRONT OF EACH POWER YOU ARE GRANTING.
TO WITHHOLD A POWER, DO NOT INITIAL THE LINE IN FRONT OF IT. YOU MAY, BUT NEED NOT, CROSS OUT EACH POWER WITHHELD.
Note: If you initial Item A or Item B, which follow, a notarized signature will be required on behalf of the Principal.
INITIAL
(A) Real property transactions. To lease, sell, mortgage, purchase, exchange, and acquire, and to agree, bargain, and contract for the lease, sale, purchase, exchange, and acquisition of, and to accept take, receive, and possess any interest in real property whatsoever, on such terms and conditions, and under such covenants, as my Agent shall deem proper; and to maintain, repair, tear down, alter, rebuild, improve manage, insure, move, rent, lease, sell convey, subject to liens, mortgages, and security deeds, and in any way or manner deal with all or any part of any interest in real property whatsoever, including

specifically, but without limitation, real property lying and being situated in the State of Kansas, under



such terms and conditions, and under such covenants, as my Agent shall deem proper and may for all deferred payments accept purchase money notes payable to me and secured by mortgages or deeds to secure debt, and may from time to time collect and cancel any of said notes, mortgages, security interest, or deeds to secure debt.

<b> (B) Tangible personal property transactions.</b> To lease, sell, mortgage, purchase, exchange,
and acquire, and to agree, bargain, and contract for the lease, sale, purchase, exchange, and acquisition
of, and to accept, take receive, and possess any personal property whatsoever, tangible or intangible, or
interest thereto, on such terms and conditions, and under such covenants, as my Agent shall deem
proper; and to maintain, repair, improve, manage, insure, rent, lease, sell, convey subject to liens or
mortgages, or to take any other security interest in said property which are recognized under the Uniform
Commercial Code as adopted at that time under the laws of the State of Kansas or any applicable state,
or otherwise hypothecate (pledge), and in any way or manner deal with all or any part of any real or
personal property whatsoever, tangible or intangible, or any interest therein, that I own at the time of
execution or may thereafter acquire, under such terms and conditions, and under such covenants, as my
Agent shall deem proper.
(C) Stock and bond transactions. To purchase, sell, exchange, surrender, assign, redeem, vote
at any meeting, or otherwise transfer any and all shares of stock, bonds, or other securities in any
business, association, corporation, partnership, or other legal entity, whether private or public, now or
hereafter belonging to me.
(D) Commodity and option transactions. To buy, sell, exchange, assign, convey, settle
and exercise commodities futures contracts and call and put options on stocks and stock indices traded
on a regulated options exchange and collect and receipt for all proceeds of any such transactions;
establish or continue option accounts for the principal with any securities or futures broker; and, in
general, exercise all powers with respect to commodities and options which the principal could if present
and under no disability.
(E) Banking and other financial institution transactions. To make, receive, sign,
endorse, execute, acknowledge, deliver and possess checks, drafts, bill of exchange, letters of credit,
notes, stock certificates, withdrawal receipts and deposit instruments relating to accounts or deposits of
banks, savings and loans, credit unions, or other institutions or associations. To pay all sums of money, at
any time or times, that may hereafter be owing by me upon any account, bill of exchange, check, draft,
purchase, contract, note, or trade acceptance made, executed, endorsed, accepted, and delivered by me
or for me in my name, by my Agent. To borrow from time to time such sums of money as my Agent may

**(F) Business operating transactions.** To conduct, engage in, and otherwise transact the affairs of any and all lawful business ventures of whatever nature or kind that I may now or hereafter be involved in. To organize or continue and conduct any business which term includes, without limitation, any farming, manufacturing, service, mining, retailing or other type of business operation in any form, whether as a proprietorship, joint venture, partnership, corporation, trust or other legal entity: operate, buy, sell, expand, contract, terminate or liquidate any business; direst, control, supervise, manage or participate in the operation of any business and engage, compensate and discharge business managers, employees

deem proper and execute promissory notes, security deeds or agreements, financing statements, or other

security instruments in such form as the lender may request and renew said notes and security instruments from time to time in whole or in part. To have free access at any time or times to any safe

deposit box or vault to which I might have access.



agents, attorneys, accountants and consultants; and, in general, exercise all powers with respect to business interests and operations which the principal could if present and under no disability. (G) Insurance and annuity transactions. To exercise or perform any act, power, duty, right or obligation, in regard to any contract of life, accident, health, disability, liability, or other type of insurance or any combination of insurance; and to procure new or additional contracts of insurance for me and to designate the beneficiary of same; provided, however, that my Agent cannot designate himself or herself as beneficiary of any such insurance contracts. (H) Estate, trust, and other beneficiary transactions. To accept, receipt for, exercise, release, reject, renounce, assign disclaim, demand, sue for, claim and recover any legacy, bequest, devise, gift or other property interest or payment due or payable to or for the principle: assert any interest in and exercise any power over any trust, estate, or property subject to fiduciary control; establish a revocable trust solely for the benefit of the principal that terminates at the death of the principal and is then distributable to the legal representative of the estate of the principal; and, in general, exercise all powers with respect to estates and trusts which the principal could exercise if present and under no disability; provided, however, that the Agent may not make or change a will and may not revoke or amend a trust revocable or amendable by the principal or require the trustee of any trust for the benefit of the principal or require the trustee of any trust for the benefit of the principal to pay income or principal to the Agent unless specific authority to that end is given. (I) Claims and litigation. To commence, prosecute, discontinue, or defend all actions or other legal proceedings touching my property, real or personal, or any part thereof, or touching any matter in which I or my property, real or personal, may be in any way concerned. To defend, settle, adjust, make allowances, compound, submit to arbitration, and compromise all accounts, reckonings, claims, and demands whatsoever that now are, or hereafter shall be, pending between me and any person, firm, corporation, or other legal entity, in such manner and in all respects as my Agent shall deem proper. (J) Personal and family maintenance. To hire accountants, attorneys at law, consultants, clerks, physicians, nurses, agents. servants, workmen, and others and to remove them, and to appoint others in their place, and to pay and allow the persons so employed such salaries, wages, or other remunerations, as my Agent shall deem proper. (K) Benefits from Social Security, Medicare, Medicaid, or other governmental programs, or military service. To prepare, sign and file any claim or application for Social Security, unemployment or military service benefits; sue for, settle or abandon any claims to any benefit or assistance under any federal, state, local or foreign statute or regulation; control, deposit to any account, collect, receipt for, and take title to and hold all benefits under any Social Security, unemployment, military service or other state, federal, local, or foreign statute or regulation; and, in general, exercise all powers with respect to Social Security, unemployment, military service, and governmental benefits, including but not limited to Medicare and Medicaid, which the principal could exercise if present and under no disability. (L) Retirement plan transactions. To contribute to, withdraw from and deposit funds in any type of retirement plan (which term includes, without limitation, any qualified or nonqualified pension, profit sharing, stock bonus, employee savings and other retirement plan, individual retirement account, deferred compensation plan and any other type of employee benefit plan); select and change payment options for the principal under any retirement plan; make rollover contributions from any retirement plans or individual retirement accounts; exercise all investment powers available under any type of self-directed



account balances which the principal could if present and under disability.
(M) Tax matters. To prepare, to make elections, to execute and to file all tax, social security, unemployment insurance, and informational returns required by the laws of the United States, or of any state or subdivision thereof, or of any foreign government; to prepare, to execute, and to file all other papers and instruments which the Agent shall think to be desirable or necessary for safeguarding me against excess or illegal taxation or against penalties imposed for claimed violation of any law or other governmental regulation; and to pay, to compromise, or to contest or to apply for refunds in connection with any taxes or assessments for which I am or may be liable.
(N) ALL OF THE POWERS LISTED ABOVE. YOU NEED NOT INITIAL ANY OTHER LINES IF YOU INITIAL LINE (N).
SPECIAL INSTRUCTIONS:
ON THE FOLLOWING LINES YOU MAY GIVE SPECIAL INSTRUCTIONS LIMITING OR EXTENDING THE POWERS GRANTED TO YOUR AGENT.

retirement plan; and, in general, exercise all powers with respect to retirement plans and retirement plan

THIS POWER OF ATTORNEY IS EFFECTIVE IMMEDIATELY AND WILL CONTINUE UNTIL IT IS REVOKED.

THIS IS A DURABLE POWER OF ATTORNEY AND THE AUTHORITY OF MY ATTORNEY-IN-FACT, WHEN EFFECTIVE, SHALL NOT TERMINATE OR BE VOID OR VOIDABLE IF I AM OR BECOME DISABLED OR IN THE EVENT OF LATER UNCERTAINTY AS TO WHETHER I AM DEAD OR ALIVE.

(YOUR AGENT WILL HAVE AUTHORITY TO EMPLOY OTHER PERSONS AS NECESSARY TO ENABLE THE AGENT TO PROPERLY EXERCISE THE POWERS GRANTED IN THIS FORM, BUT YOUR AGENT WILL HAVE TO MAKE ALL DISCRETIONARY DECISIONS. IF YOU WANT TO GIVE YOUR AGENT THE RIGHT TO DELEGATE DISCRETIONARY DECISION-MAKING POWERS TO OTHER, YOU SHOULD KEEP THE NEXT SENTENCE, OTHERWISE IT SHOULD BE STRICKEN.)

**Authority to Delegate.** My agent shall have the right by written instrument to delegate any or all or the foregoing powers involving discretionary decision-making to any person or persons whom my Agent may select, but such delegation may be amended or revoked by any agent (including any successor) named by me who is acting under this power of attorney at the time of reference.

(YOUR AGENT WILL BE ENTITLED TO REIMBURSEMENT FOR ALL REASONABLE EXPENSES INCURRED IN ACTING UNDER THIS POSER OF ATTORNEY. STRIKE OUT THE NEXT SENTENCE IF YOU DO NOT WANT YOUR AGENT TO ALSO BE ENTITLED TO REASONABLE COMPENSATION FOR SERVICES AS AGENT.)

**Right to Compensation.** My Agent shall be entitled to reasonable compensation for services rendered as agent under this power of attorney.



(IF YOU WISH TO NAME SUCCESSOR AGENTS, INSERT THE NAME(S) AND ADDRESS(ES) OF SUCH SUCCESSOR(S) IN THE FOLLOWING PARAGRAPH.)

**Successor Agent.** If any Agent named by me shall die, become incompetent, resign or refuse to accept the office of Agent, I name the following (each to act alone and successively, in the order named) as successor(s) to such Agent

Successor Name:
Address:
Successor Name:
Address:
Choice of Law. THIS POWER OF ATTORNEY WILL BE GOVERNED BY THE LAWS OF THE STATE OF KANSAS WITHOUT REGARD FOR CONFLICTS OF LAWS OR PRINCIPLES. IT WAS EXECUTED IN THE STATE OF KANSAS AND IS INTENDED TO BE VALID IN ALL JURISDICTIONS OF THE UNITED STATES OF AMERICA AND ALL FOREIGN NATIONS.
I am fully informed as to all the contents of this form and understand the full import of the grant of powers to my Agent.
I agree that any third party who receives a copy of this document may act under it. Revocation of the power of attorney is not effective as to a third party until the third party learns of the revocation. I agree to indemnify the third party for any claims that arise against the third party because of reliance on this power of attorney.
This document must be: (1) Witnessed by two individuals of lawful age who are not the agent, not related to the principal by blood, marriage or adoption, not entitled to any portion of the principal's estate, <b>OR</b>
(2) Acknowledged by a notary public.
STATEMENT OF WITNESS
On the date written above, the principal declared to me in my presence that this instrument is a durable power of attorney and that he or she had willingly signed or directed another to sign for him or her, and that he or she executed it as his or her free and voluntary act for the purposes therein expressed.
Witness 1 Signature:
Witness 1 Printed Name:
Witness 1 Address:



Witness 2 Signature:	
Witness 2 Printed Name:	
Witness 2 Address:	
the Power of Attorney. Each witness mus	each witness must be present at the time that principal signs t be a mentally competent adult. Witnesses should ideally residusible in the event they are one day needed to affirm this
SIGNATURE AN	D ACKNOWLEDGMENT OF PRINCIPAL
Your Signature	Date
Your Name Printed:	
Your Address:	
Your Telephone Number:	



#### CERTIFICATE OF ACKNOWLEDGMENT OF NOTARY PUBLIC

STATE OF KANSAS				
COUNTY OF				
This document was acknow	edged before me on this	day of _		, 20
by	(Name of Principal)			
Notary Seal, if any				
				(Signature of Notary)
			Notary Public fo	or the State of Kansas
		My commis	sion expires:	
Agent's Duties	IMPORTANT INFORMA	TION FOR A	GENT	
When you accept the author between you and the princip resign or the power of attorn	al. This relationship imposes	s upon you le		•
(1) do what you know the pr not know the principal's exp (2) act in good faith;				property or, if you do
(3) do nothing beyond the a (4) disclose your identity as the principal and signing you	an agent whenever you act	for the princi	oal by writing or	printing the name of
	(Principal's Name) by (You	r Signature) a	as Agent	
_			<del></del>	
Unless the Special Instruction	ons in this power of attorney	state otherw	ise, you must al	so:

- (1) act loyally for the principal's benefit;
- (2) avoid conflicts that would impair your ability to act in the principal's best interest;
- (3) act with care, competence, and diligence;
- (4) keep a record of all receipts, disbursements, and transactions made on behalf of the principal;
- (5) cooperate with any person that has authority to make health care decisions for the principal to do what you know the principal reasonably expects or, if you do not know the principal's expectations, to act in the



principal's best interest; and attempt to preserve the principal's estate plan if you know the plan and preserving the plan is consistent with the principal's best interest.

#### **Termination of Agent's Authority**

You must stop acting on behalf of the principal if you learn of any event that terminates this power of attorney or your authority under this power of attorney. Events that terminate a power of attorney or your authority to act under a power of attorney include:

- (1) death of the principal;
- (2) the principal's revocation of the power of attorney or your authority;
- (3) the occurrence of a termination event stated in the power of attorney;
- (4) the purpose of the power of attorney is fully accomplished; or
- (5) if you are married to the principal, a legal action is filed with a court to end your marriage, or for your legal separation, unless the Special Instructions in this power of attorney state that such an action will not terminate your authority.

#### **Liability of Agent**

The meaning of the authority granted to you is defined in the Kansas Power of Attorney Act, Chapter 58, Article 6. If you violate the Kansas Power of Attorney Act, Chapter 58, Article 6, or act outside the authority granted, you may be liable for any damages caused by your violation.

If there is anything about this document or your duties that you do not understand, you should seek legal advice.

# AGENT'S CERTIFICATION AS TO THE VALIDITY OF POWER OF ATTORNEY AND AGENT'S AUTHORITY

State of	
County of	
	) granted me authority as an agent or successor agent
in a power of attorney dated	·
I, further certify that to my knowledge:	
terminated; (2) If the power of attorney was drafted to become contingency, the event or contingency has occurred	ny authority to act under the power of attorney have no e effective upon the happening of an event or ed;
(3) If I was named as a successor agent, the prior (4)	
	(Insert other relevant statement
Agent's Signature	Date
Agent's Name Printed:	
Agent's Address:	
Agent's Telephone Number:	
This document was acknowledged before me on	
(Date), by	(Name of Agent).
Signature of Notary	_
(Seal, if any)	
My commission expires:	
This document prepared by:	



### PREPARATION OF STATEMENT

This document was prepared by the following individual:	
(Typed or Printed Name)	
	(Signature)

