NEW YORK DURABLE POWER OF ATTORNEY

(a) CAUTION TO THE PRINCIPAL: Your Power of Attorney is an important document. As the "principal," you give the person whom you choose (your "agent") authority to spend your money and sell or dispose of your property during your lifetime without telling you. You do not lose your authority to act even though you have given your agent similar authority.

When your agent exercises this authority, he or she must act according to any instructions you have provided or, where there are no specific instructions, in your best interest. "Important Information for the Agent" at the end of this document describes your agent's responsibilities.

Your agent can act on your behalf only after signing the Power of Attorney before a notary public.

You can request information from your agent at any time. If you are revoking a prior Power of Attorney, you should provide written notice of the revocation to your prior agent(s) and to any third parties who may have acted upon it, including the financial institutions where your accounts are located.

You can revoke or terminate your Power of Attorney at any time for any reason as long as you are of sound mind. If you are no longer of sound mind, a court can remove an agent for acting improperly.

Your agent cannot make health care decisions for you. You may execute a "Health Care Proxy" to do this.

The law governing Powers of Attorney is contained in the New York General Obligations Law, Article 5, Title 15. This law is available at a law library, or online through the New York State Senate or Assembly websites, www.senate.state.ny.us or www.assembly.state.ny.us.

If there is anything about this document that you do not understand, you should ask a lawyer of your own choosing to explain it to you.

(b) DESIGNATION OF AGENT(S):

I,[Principal name],	
[Address], hereby appoint:		[Agent name],
	[Address] and	[Optiona
co-agent name],		[Address] as my agent(s).
If you designate more than one agent above, the below.	ey must act together unl	ess you initial the statement
My agents may act SEPARATELY.		



(c) DESIGNATION OF SUCCESSOR AGENT(S): (OPTIONAL)

If any agent designated above is unable or unwilling to [Successor name],	• • • • • • • • • • • • • • • • • • • •
[Address] and	[Co-successor name],
[Addre	ss].
Successor agents designated above must act togethe	r unless you initial the statement below.
My successor agents may act SEPARATELY.	
You may provide for specific succession rules in this s	section. Insert specific succession provisions here:
(d) This POWER OF ATTORNEY shall not be affecte otherwise below, under "Modifications".	d by my subsequent incapacity unless I have stated
(e) This POWER OF ATTORNEY DOES NOT REVORME unless I have stated otherwise below, under "Mod	
If you do NOT intend to revoke your prior Powers of A in this Power of Attorney as you granted to another ag separately unless you indicate under "Modifications" together.	gent in a prior Power of Attorney, each agent can ac
(f) GRANT OF AUTHORITY:	
To grant your agent some or all of the authority below	, either
(1) Initial the bracket at each authority you grant, or (2) Write or type the letters for each authority you grar (P). If you initial (P), you do not need to initial the other	
I grant authority to my agent(s) with respect to the followard formula through 5-1502N of the New York General Obligations	
(A) real estate transactions;	
(B) chattel and goods transactions;	
(C) bond, share, and commodity transactions;	
(D) banking transactions;	
(F) business operating transactions:	



Additional Provisions:
In this section, you may make additional provisions, including language to limit or supplement authority granted to your agent. However, you cannot use this Modifications section to grant your agent authority to make gifts or changes to interests in your property. If you wish to grant your agent such authority, you MUST complete the Statutory Gifts Rider.
(g) MODIFICATIONS: (OPTIONAL)
(P) EACH of the matters identified by the following letters: A, B,C, D, E, F, G, H, I, J, K, L, M, N, and O. You need not initial the other lines if you initial line (P).
(O) full and unqualified authority to my agent(s) to delegate any or all of the foregoing powers to any person or persons whom my agent(s) select;
(N) all other matters;
(M) tax matters;
(L) retirement benefit transactions;
(K) health care billing and payment matters, records, reports, and statements;
(J) benefits from governmental programs or civil or military service;
(I) personal and family maintenance. If you grant your agent this authority, it will allow the agent to make gifts that you customarily have made to individuals, including the agent, and charitable organizations. The total amount of all such gifts in any one calendar year cannot exceed five hundred dollars;
(H) claims and litigation;
(G) estate transactions;
(F) insurance transactions;

(h) CERTAIN GIFT TRANSACTIONS: STATUTORY GIFTS RIDER (OPTIONAL)

In order to authorize your agent to make gifts in excess of an annual total of \$500 for all gifts described in (I) of the grant of authority section of this document (under personal and family maintenance), you must initial the statement below and execute a Statutory Gifts Rider at the same time as this instrument. Initialing the statement below by itself does not authorize your agent to make gifts. The preparation of the Statutory Gifts Rider should be supervised by a lawyer.



(SGR) I grant my agent authority	y to make gifts in accordance	with the terms and conditions of the
Statutory Gifts Rider that supplements	this Statutory Power of Attorr	ney.
(i) DESIGNATION OF MONITOR(S):	(OPTIONAL)	
If you wish to appoint monitor(s), initial	and fill in the section below:	
I wish to designate	, and	whose address(es)
is (are)		and
must provide the monitor(s) with a copy made on my behalf. Third parties holding monitor(s) upon request.	y of the power of attorney and ng records of such transaction	
(j) COMPENSATION OF AGENT(S):	(OPTIONAL)	
Your agent is entitled to be reimbursed behalf. If you ALSO wish your agent(s) your behalf, initial the statement below above, under "Modifications".	to be compensated from you	r assets for services rendered on
My agent(s) shall be entitled to r	reasonable compensation for	services rendered.
(k) ACCEPTANCE BY THIRD PARTIE arise against the third party because of termination of this Power of Attorney, we otherwise, is not effective as to a third party termination.	f reliance on this Power of Att whether the result of my revoc	orney. I understand that any ation of the Power of Attorney or
(I) TERMINATION: This Power of Attor other event described in section 5-151	•	
Section 5-1511 of the General Obligation Power of Attorney, and the events which		
(m) SIGNATURE AND ACKNOWLED	GMENT:	
In Witness Whereof I have hereunto sig	gned my name on	
PRINCIPAL signs here:		
Your Name Printed:		
Your Address:		
Your Telephone Number:		



State of New York)				
) ss.				
County of)				
On this day of _		20	_, before me,		,
personally appeared			, pers	onally known to m	ne or who proved to
me on the basis of satis					
and acknowledged to m	•	•			
his/her signature on this				•	,,
3	'				
Signature					
My commission expires	.				



(n) IMPORTANT INFORMATION FOR THE AGENT:

When you accept the authority granted under this Power of Attorney, a special legal relationship is created between you and the principal. This relationship imposes on you legal responsibilities that continue until you resign or the Power of Attorney is terminated or revoked. You must:

- (1) act according to any instructions from the principal, or, where there are no instructions, in the principal's best interest;
- (2) avoid conflicts that would impair your ability to act in the principal's best interest;
- (3) keep the principal's property separate and distinct from any assets you own or control, unless otherwise permitted by law;
- (4) keep a record or all receipts, payments, and transactions conducted for the principal; and
- (5) disclose your identity as an agent whenever you act for the principal by writing or printing the principal's name and signing your own name as "agent" in either of the following manners:

(Principal's Name) by _	(Your Signature) as Agent, or
(your signature) as	Agent for (Principal's Name).

You may not use the principal's assets to benefit yourself or anyone else or make gifts to yourself or anyone else unless the principal has specifically granted you that authority in this document, which is either a Statutory Gifts Rider attached to a Statutory Short Form Power of Attorney or a Non-Statutory Power of Attorney. If you have that authority, you must act according to any instructions of the principal or, where there are no such instructions, in the principal's best interest. You may resign by giving written notice to the principal and to any co-agent, successor agent, monitor if one has been named in this document, or the principal's guardian if one has been appointed. If there is anything about this document or your responsibilities that you do not understand, you should seek legal advice.

Liability of agent:

The meaning of the authority given to you is defined in New York's General Obligations Law, Article 5, Title 15. If it is found that you have violated the law or acted outside the authority granted to you in the Power of Attorney, you may be liable under the law for your violation.



(o) AGENT'S CERTIFICATION AS TO THE VALIDITY OF POWER OF ATTORNEY AND AGENT'S AUTHORITY

·	ncipal and the agent(s) sign	at the same time, nor that multiple agents sign at
the same time.		
I/we,	, and	, have read the foregoing Power
of Attorney. I am/we are the	person(s) identified therein	as agent(s) for the principal named therein.
I/we acknowledge my/our le	gal responsibilities.	
Agent(s) sign(s) here:		
Agent's Name Printed:		
Agent's Address:		
Agent's Telephone Number:		
Agent(s) sign(s) here:		
Agent's Name Printed:		
Agent's Address:		
Agent's Telephone Number:		<u> </u>
(p) SUCCESSOR AGENT'S	SIGNATURE AND ACKNO	OWLEDGMENT OF APPOINTMENT:
·	•	R agent(s), if any, sign at the same time, nor that orthermore, successor agents can not use this
•	•	is/are unable or unwilling to serve.
I/we,	, and	, have read the foregoing Power
of Attorney. I am/we are the therein.	person(s) identified therein	as SUCCESSOR agent(s) for the principal named
Successor Agent(s) sign(s)	here:	
Successor Agent's Name Pr		
Successor Agent's Address:		
Successor Agent's Telephor	ne Number:	
Successor Agent(s) sign(s)	here:	
Successor Agent's Name Pr	inted:	
Successor Agent's Address: Successor Agent's Telephor	ne Number:	
9		

