

COLORADO STATUTORY POWER OF ATTORNEY

State of Colorado

NOTICE: THE POWERS GRANTED BY THIS DOCUMENT ARE BROAD AND SWEEPING. THEY ARE EXPLAINED IN THE UNIFORM 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 HEALTH-CARE DECISIONS FOR YOU.

I, _____, grant a power of attorney to
_____ to act as my agent in any lawful way
with respect to the following initialed subjects:

INITIAL each subject you want to include in the agent's general authority.

If you wish to grant limited authority to make gifts, complete the additional provisions below.

- _____ Real property transactions
- _____ Tangible personal property transactions
- _____ Stock and bond transactions
- _____ Commodity and option transactions
- _____ Banking and other financial institution transactions
- _____ Business operation transactions
- _____ Insurance and annuity transactions
- _____ Estate, trust, and other beneficiary transactions
- _____ Claims and litigation
- _____ Personal and family maintenance
- _____ Benefits from social security, Medicare, Medicaid, or other governmental programs, or military service
- _____ Retirement plan transactions
- _____ Tax matters

Effective Date: _____

Successor Agent: _____

This power of attorney becomes effective on _____

Principal's Signature: _____ Date: _____

WITNESS ATTESTATION

I certify that the principal is personally known to me, that the