

Continuation sheet 1

Additional people

Helpline
0300 456 0300

Use this page if told to in section 2, 4 or 6 of the lasting power of attorney form.

If you use this page, you must sign it.

Help?

For help with this section, see the Guide, parts A2, A4 and A6.



- ☒ **Attorney** LPA section 2
- ☐ **Replacement attorney** LPA section 4
- ☐ **Person to notify** LPA section 6

Title First names
MR AGARWAL

Last name
CHAUTALA

Date of birth (not required for 'person to notify')

0 1 0 2 1 9 7 8
Day Month Year

Address
3 BMX ROAD
MOUNTAINSHIRE

Postcode MT2 2TM

Email address (optional)
a-c@gmail.com

- ☒ **Attorney** LPA section 2
- ☐ **Replacement attorney** LPA section 4
- ☐ **Person to notify** LPA section 6

Title First names
MRS CHANDINI

Last name
KHANA

Date of birth (not required for 'person to notify')

0 3 0 5 1 9 8 3
Day Month Year

Address
4 KABHI KHUSHI KABI GHAM ROAD
AFLATOON COLONY

Postcode AF2 3PR

Email address (optional)
c_khana@luv.com

Donor

You must sign here before you sign section 9 of the LPA, or on the same day.

Full name
KATIE HORTON

Signature or mark

Date signed or marked
1 6 0 2 2 0 2 5
Day Month Year

Continuation sheet 2

Additional information

Helpline
0300 456 0300



Use this page if told to in section 3, 4 or 7 of the lasting power of attorney form.



If you use this page, you must sign it.

What additional information are you providing?

Use a fresh copy of this page for each type of additional information

- ☐ **Decisions attorneys should make jointly** LPA section 3
- ☒ **How replacement attorneys step in and act** LPA section 4
- ☐ **Preferences** LPA section 7
- ☐ **Instructions** LPA section 7



Help?
For help with this section, see the Guide, parts A3, A4 and A7.

REPLACEMENT ATTORNEY CAN ACT ON THEIR OWN BUT SOMETIMES THEY HAVE TO LISTEN
NOBODY

Donor

You must sign here before you sign section 9 of the LPA, or on the same day.

Full name

KATIE HORTON

Signature or mark

Date signed or marked

1	6	0	2	2	0	2	5
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Day

Month

Year

Only valid with the official stamp here.

LPC Continuation sheet 2 (07.15)

Continuation sheet 3

If the donor cannot sign or mark

Helpline
0300 456 0300



Only fill in this page if the donor cannot sign or make a mark in section 9 of the lasting power of attorney form

Donor

Full name

KATIE HORTON

Signatory

You must:

- sign in the donor's presence and in the presence of 2 witnesses
- sign in your own name
- not also be a witness to this LPA
- sign any copies of Continuation Sheet 1 and 2 used in this LPA at the same time

If the LPA is for health and care decisions:

- you must also sign and date either Option A or Option B of Section 5, as directed by the donor
- your signature in Section 5 must be witnessed

Signed as a deed and delivered in the presence of and at the direction of the person giving this lasting power of attorney and in the presence of two witnesses.

Signature or mark

Full name of person signing

Date signed or marked

1 6 0 2 2 0 2 5

Day Month Year

Witnesses

Witnesses must **not** be attorneys or replacement attorneys appointed under this LPA and must be aged 18 or over.

Signature or mark of first witness

Full name of first witness

PINK PANTHER

Address of first witness

PANTHER ROAD

LION GROVE

Postcode LG25 2TL

Signature or mark of second witness

Full name of second witness

ZAMAN KHAN

Address of second witness

LION GROVE

PANTHER ROAD

Postcode PR3 2OL



For help with this section,
see the Guide, part A9.

Only valid with the official stamp here.

LPC Continuation sheet 3 (07.15)

Continuation sheet 4

Trust corporation appointed as an attorney

Helpline
0300 456 0300



Only use this page if the donor has appointed a trust corporation as an attorney or replacement attorney

By execution of this deed the trust corporation understands and confirms all of the following:

- It has read this lasting power of attorney (LPA), including section 8 'Your legal rights and responsibilities'.
- It has a duty to act based on the principles of the Mental Capacity Act 2005 and to have regard to the Mental Capacity Act Code of Practice.
- It can make decisions and act only when this LPA has been registered.
- It must make decisions and act in the best interests of the person giving this LPA.
- It is not going through winding-up proceedings.
- It can spend money to make gifts but only to charities or on customary occasions such as birthdays, and for reasonable amounts, with regard to size of the donor's estate.
- It has a duty to keep accounts and financial records and produce them to the Office of the Public Guardian or to the Court of Protection on request.
- It can make decisions and act regarding the donor's property and financial affairs only at the time indicated in section 5 of this LPA.

Further statement by a trust corporation acting as a replacement attorney: It has the authority to act under this LPA only after an original attorney's appointment is terminated. It must notify the Public Guardian if that happens.

Help?

For help with this section, see the Guide, part A11.

Company registration number

2233445566

I/We are authorised to sign on behalf of the trust corporation acting as attorney whose details are given in this continuation sheet to this lasting power of attorney.

Signed as a deed and delivered by:

Signature of first authorised person

Full name of first authorised person

JONES RED

Date signed or marked

1	6	0	2	2	0	2	5
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Day

Month

Year

Signature of second authorised person (if required)

Full name of second authorised person (if required)

STAR JACKSON

Date signed or marked (if required)

1	6	0	2	2	0	2	5
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Day

Month

Year