

POWER OF ATTORNEY WORKSHEET

PRIVACY ACT STATEMENT: Information is solicited in accordance with Title 10, US Code Section 3013, and is used to prepare a Power of Attorney (POA). Providing information is voluntary; however, failure to provide information precludes the preparation of a power of attorney.

Before making a General Power of Attorney, read this **CAUTION**:

Making a General Power of Attorney (GPOA) is an important action with serious consequences. Your GPOA gives someone else the legal authority to act on your behalf-to do **anything** that you could do. With a GPOA, your agent can (for example) rent or buy a house with your money, borrow money that you must repay, sell your car, sue someone for you, or remove all funds from your bank account. Your agent can legally bind you. While a GPOA can be very helpful, it can also be very dangerous. Regarding a GPOA, consider:

- Limit the power you give away to only what is necessary. If you need someone to perform only a specific task for you, then you don't need a GPOA. Get a *Special* Power of Attorney-one that will authorize your agent to perform only those specific tasks. We can help you prepare one.
- Limit the duration of your Power of Attorney to no longer than two years or a shorter period. Don't set the expiration date longer than you need the agent's services, and don't give the Power of Attorney before it will be needed.
- Make sure your agent is someone you can trust. If you lose trust in your agent, talk to your legal assistance attorney about *revoking* your Power of Attorney.
- Don't hesitate to talk to an attorney if you have any questions.

Please fill this form in order for us to prepare a power of attorney.

Please prepare the requested legal document for legal document using the information provided below.

Client's signature and Today's date

NAME OF GRANTOR: _____
(First Name, Middle Initial, Last Name)

RANK/GRADE: _____

UNIT: _____

PHYSICAL ADDRESS: _____

Phone number (work) _____

Phone number (home) _____

___ ACTIVE DUTY

___ GUARD/RESERVE

___ FAMILY MEMBER

___ RETIRED

NAME OF PERSON RECEIVING POA: _____

ADDRESS: _____

EXPIRATION OF POA (maximum two years): _____

___ GENERAL POWER OF ATTORNEY

If you would prefer to give the person a limited power of attorney fill in below.

___ SPECIAL POWER OF ATTORNEY (S): If desired, please check one or more of the following special powers of attorney.

1. AUTOMOBILE:

___ Sell ___ Register ___ Ship ___ Transfer Title ___ Other

Year: Make: Model: Color:

License: Vehicle ID#: _____

For Shipment of POV:

Shipment To

Shipment From: _____

2. BABYSITTING/TEMPORARY CUSTODY OF CHILD (REN):

Name of Child (ren) and DOB:

3. BANK TRANSACTIONS:

Check cashing

Deposit

Withdraw

4. REAL ESTATE:

Sell Buy Manage Mortgage

ADDRESS OF REAL ESTATE: _____

Legal Description of Title to Real Estate: _____

5. HOUSEHOLD GOODS:

Ship Receive

Shipment from: _____

Shipment to: _____

6. OTHER (please describe): _____

7. REVOCATION OF POWER OF ATTORNEY:

Name of person granted power of attorney: _____

Type of power of attorney granted:

Special

General

Date power of attorney was granted: _____