

POWERS OF ATTORNEY WORKSHEET

INSTRUCTIONS: A power of attorney is a legal document that authorizes someone else to act in your name and as your agent. The actions of your agent using your power of attorney will be binding on you, so you should grant a power only to someone you trust and only to the extent that is absolutely necessary. If you have questions about the use or effect of a power of attorney, the legal assistance staff will be happy to assist you. Making a General Power of Attorney (GPOA) is an important action that has serious legal consequences. 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. Advice regarding GPOA: Don't give away more power than necessary. If you need someone to perform only specific tasks 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 1 year or a shorter period. Don't set the expiration date longer than you will need your 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 with a legal assistance attorney about *revoking* your Power of Attorney. (rev. 8/22)

PLEASE COMPLETE THIS FORM IN ORDER FOR US TO PREPARE A POWER OF ATTORNEY

PRIVACY ACT STATEMENT			
AUTHORITY: 5 U.S.C. § 301; 44 U.S.C. § 3101 (E.O. 9397) PRINCIPAL PURPOSE: Obtain personal information to prepare legal document(s). ROUTINE USE(S): Information provided will be used by legal assistance personnel to prepare power(s) of attorney requested by the individual providing the information. DISCLOSURE: Voluntary; however, failure to provide the requested information may prevent furnishing of requested legal assistance services.			
YOUR SIGNATURE: <i>Not Applicable for Online Requests and Processing</i>		DATE:	
YOUR FULL NAME (GRANTOR):		EMP ID #:	
YOUR HOME ADDRESS:			
HOME PHONE:		CELL PHONE:	WORK PHONE:
YOUR E-MAIL ADDRESS:			
YOUR STATE OF LEGAL RESIDENCE:			
YOUR STATUS (CHECK ONE): ACTIVE <input type="checkbox"/> DEPENDENT <input type="checkbox"/> RETIREE <input type="checkbox"/> RESERVE <input type="checkbox"/>			
SERVICE BRANCH (CHECK ONE): USCG <input type="checkbox"/> USN <input type="checkbox"/> USMC <input type="checkbox"/> USA <input type="checkbox"/> USAF <input type="checkbox"/>			
RANK/RATE:		UNIT:	FAX #:
UNIT ADDRESS:			
FULL NAME of PERSON YOU ARE APPOINTING as YOUR AGENT (GRANTEE):			RELATIONSHIP to you:
AGENT/GRANTEE'S ADDRESS:			

CHECK WHICH DOCUMENT YOU WANT:

GENERAL power of attorney - authorizes your agent to act for you and in your name in all matters - including such things as borrowing money, signing contracts, and accessing your bank accounts - in other words, to do anything you could do were you present.

SPECIAL power of attorney - authorizes your agent to act for you and in your name only for those matters specified in the document - for example, you can authorize your agent to sell your car or house, ship or receive your household goods.

EXPIRATION DATE OF THIS POWER: _____ (limited to time necessary or 1 year, whichever is shorter. In rare cases can be greater than 1 year after consult with an attorney.)

POA will be Notarized by: NOTARY PUBLIC or MILITARY OFFICER

FOR SPECIAL POWERS OF ATTORNEY ONLY

AUTOMOBILE:		BUY/SELL			REGISTER		INSURE		SHIP	
Buy/Sell Auto	YEAR	MAKE:	MODEL:	COLOR:	VIN:				STATE:	TAG:
\$										
Register Auto:	YEAR	MAKE:	MODEL:	COLOR:	VIN:				STATE:	TAG:
Insure:	YEAR	MAKE:	MODEL:	COLOR:	VIN:		DL #:		STATE:	TAG:
Ship Auto From: (address)					Ship Auto To: (address)					
YEAR	MAKE:	MODEL:	COLOR:	VIN:				STATE:	TAG:	

BANKING TRANSACTIONS:		Cash Checks		Endorse Instruments	
Apply for loans		Indicate amount: \$	and	max. interest rate %	
Access Bank Accounts		Bank Name:		Account #:	
Bill Paying		Company/Service:		Account #:	
		Company/Service:		Account #:	

REAL PROPERTY TRANSACTIONS:		Buy	Sell	Mortgage	Refinance	Manage Rental Property
Address of Real Estate (Street City and State - including county):						
Legal Description of Title to Real Estate: preferably what is listed on the deed – at a minimum must describe what type of property is being rented, bought, or sold – condo, single-family etc...						
Asking/Selling Price (no less than \$xx): \$				Purchase Price- (not to exceed \$xx): \$		
Loan application - in the amount of: \$						
Contract with builder:	Lot:		City:		State:	
Mortgage Company:	Mortgage Loan amount:		Interest Rate of Mortgage- not to exceed x% _____ %			
	\$		(example 8% or 6 ¾%)			

HOUSEHOLD GOODS/HOUSING:	
Ship Property From:	Ship Property To:
Vacate	Accept
Government housing located at:	

CHILD CARE PROVISIONS:		
Name of Child	D.O.B	last 4 of SSN
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Name of Child	D.O.B	last 4 of SSN
Emergency Medical Care	In loco parentis (temporary guardianship)	
Babysitting/Temporary Custody of Child(ren)	Medical and Dental care	
School Administration	Evacuation	
***If divorced and leaving child with a 3 rd party, is the non-custodial parent aware of this POA? (CHECK ONE)		
	YES	NO

MISCELLANEOUS:			
File Income Taxes (CHECK ONE or BOTH):	State	Federal	
Litigation: Court	City	State	Case Type:

REVOCAION of POWER of ATTORNEY		Type of POA Granted:	Special	General
Name of Grantee/Agent:		Date Granted:		