

826 BrooksideAve., Suite C • Redlands • California • 92373 • (909) 335-0155

Power Of Attorney Worksheet

Name:					
Address:		Phone #			
Who would	you like to be your power of attorn	ney?			
Name: Phone #					
Would you l	like an alternate? YES	NO			
Address:		Phone #			
Listed below	w are duties for your power of attor	rney. Check all the boxes that you would like your power of			
•		duties listed or Q for only specific powers which you would			
-	arate sheet of paper.				
(A)					
(B)	Tangible Personal Property Transactions				
(C)	Stock and Bond Transactions.				
(D)	Commodity and Option Transactions				
(E)	Banking and Other Financial Transactions.				
(F)	Business Operating Transactions.				
(G)	Insurance and Annuity Transactions.				
(H)	Estate, Trust, and Other Beneficiary Transactions.				
(I)	Claims and Litigation				
(J)	Personal and Family Maintenance.				
(K)	Benefits From Social Security, Medicare, Medical, or Other Governmental Programs or Civil or Military Service.				
(L)	Retirement Plan Transactions.				
(M)	Tax Matters.				
(N)	Making Gifts to My Spouse, Children, and More Remote Descendants, and Parents, Not to Exceed in the Aggregate \$10,000 to Each of Such Persons in Any Year.				
(O)	Full and Unqualified Authority to My Attorney(s)-In-Fact to Delegate Any or All of the Foregoing Powers to Any Person or Persons Whom My Attorney(s)-In-Fact Shall Select.				
(P)	ALL THE POWERS LISTEI				
(Q)					
(Q)	PAGE.	THED IN SI ECIAL INSTRUCTIONS ON A SEI ARATE			
Would you l	like this document to take effect th	ne day that you sign it or immediately?			
	WHEN I SIGN	IMMEDIATELY			
If you would	d like the document to take effect a	at a later date, then when would you like the document to take			

Date

Would you like the	document to only last	t for a certain amount of	days, month or years?
	YES	NO	
If yes, how many _			·
	Days	Months	Years
If you would like th	nis document to expire	on an exact date, please	list that date.
	Date		
	cifics that you wish to including any special		ment that has not yet already been covered,
cannot select forms and perform certain	that the Legal Docur and DOES NOT give services as outlined i	e legal advice. I hereby d	eparing my documents in NOT an attorney, irect the Legal Documents Assistant to type ther declare that the foregoing information
Dated:		Cianatura	
		Signature	