

Statutory Power of Attorney

On this _____ day of _____, 20____ I _____
(Name of Principal)

Name the following person as my agent:

Agent _____

Agent's Address _____

Agent's Phone Number _____

If my agent is unable or unwilling to act for me, I name as my successor agent:

Name of Successor Agent _____

Successor Agent's Address _____

Successor Agent's Phone Number _____

Grant of General Authority

I grant my agent and any successor agent authority to act for me with respect to the following subjects as defined in the Uniform Power of Attorney Act, Section 3001 et seq of Title 58 of the Oklahoma Statutes:

(Initial each subject you want to include in the agent's general authority. If you wish to grant general authority over all of the subjects you may initial "All Preceding Subjects" instead of initialing each subject.)

_____ Real Property

_____ Mineral Interest (s)

_____ Tangible Personal Property

_____ Stocks and Bonds

_____ Commodities and Options

_____ Banks and other Financial Institutions

_____ Operation of Entity or Business

_____ Insurance and Annuities

_____ Estates, Trusts and Other Beneficial Interests

_____ Claims and Litigation

_____ Personal and Family Maintenance

_____ Benefits from Governmental Programs or Civil or Military Service

_____ Retirement Plans

_____ Taxes

_____ All Preceding Subjects

Grant of Specific Authority (optional)

My agent MAY NOT do any of the following specific acts for me UNLESS I have INITIALED the specific authority listed below:

(CAUTION: Granting any of the following will give your agent the authority to take actions that could significantly reduce your property or change how your property is distributed at your death.

INITIAL ONLY the specific authority you WANT to give your agent)

- _____ Create, amend, revoke or terminate inter vivos trust
- _____ Make a gift, subject to the limitations of the Uniform Power of Attorney Act, Section 3040 of Title 58 of the Oklahoma Statutes and any special instructions in this Power of Attorney.
- _____ Create or change rights of survivorship
- _____ Create or change a beneficiary designation
- _____ Authorize another person to exercise the authority granted under this Power of Attorney
- _____ Waive the principal's right to be a beneficiary of a joint and survivor annuity, including a survivor benefit under a retirement plan.
- _____ Exercise fiduciary powers that the principal has authority to delegate
- _____ Access the contents of electronic communications
- _____ Disclaim or refuse an interest in property, including a power of appointment

SPECIAL INSTRUCTIONS (optional)

You may give special instructions on the following lines:

EFFECTIVE DATE

This power of attorney is effective immediately unless I have stated otherwise in the Special Instructions above.

Principal's signature

Printed Name

Principal's address

Phone Number

STATE OF OKLAHOMA

COUNTY OF _____

This document was acknowledged before me on this ____ day of _____, 20__

By_____.

MY COMMISSION EXPIRES

NOTARY PUBLIC