



Durable Power of Attorney—Annuities All states except New York

Use this form to grant or modify the power of a third party (your agent or "Attorney-in-Fact") to act on your behalf on one or more Fidelity annuity contracts.

What do I need to know?

It is important to ensure you have the correct form. If you cannot check all four of the boxes in this section, do not complete this form: instead, please locate the correct Power of Attorney form by accessing [Fidelity.com/poa](https://www.fidelity.com/poa) and clicking where indicated for **annuity customers**.

- I am submitting this form as the owner of an annuity contract.
- I am not a **New York resident**.
- I am not submitting this request for a Brighthouse Growth and IncomeSM or a MetLife Growth and IncomeSM product (annuity contract number begins with "83" or "81").
- I do not have my own legal POA document or I **do not** wish to use my legal POA document for this request.

Checklist for this form:

Please be sure to include the following:

- The signatures of all contract owners, two witnesses, and the notary, all completed on the same date.
- The authorized agent's signature and initials, also notarized on the signature date.

Durable Power of Attorney—Annuities All states except New York

Use this form to grant or modify the power of a third party (your agent or "Attorney-in-Fact") to act on your behalf on one or more Fidelity annuity contracts. New York residents must use the NY Durable Power of Attorney form. Do NOT use this form for custodial or non-annuity accounts like Fidelity IRA, Retirement Plan (Keogh), or non-retirement accounts. Type on screen or print out and fill in. For best results, use CAPITAL letters and black ink. If you need more room for information or signatures, make a copy of the relevant page.

Helpful to Know

- For **Brighthouse Growth and IncomeSM annuities (contract begins with "8")**, instead of this form, please complete the *Certification of Attorney-in-Fact—Brighthouse Growth and IncomeSM Annuity and MetLife Growth and IncomeSM Annuity form*.
- **This is a very important legal document.** It gives another person control over your contracts listed in Section 2 and direct access to your money. The person will have the power to buy, sell, transfer, and dispose of any assets in the contracts you identify here, including assets you may acquire in the future. **Review this document carefully with a trusted legal professional before you sign it.**
- This is a durable power of attorney (POA), meaning it remains in effect regardless of your physical or mental health — even if you become incompetent and can no longer make your own decisions or manage your own affairs. From the moment you sign this form, your Attorney-in-Fact will have the powers granted by this form until we receive written notice revoking those powers.
- **Important to note:** Once your Attorney-in-Fact is added, there will be a 30-day restriction on making withdrawals that total more than \$10,000 from the account, but exceptions can be made in certain situations. Please contact a Fidelity representative for more information.
- You have the right to modify or revoke this POA. To do so, submit a new POA form. Should you be declared incompetent, you lose the option of modifying or revoking this POA.
- You must complete Sections 1–5 and 8 yourself, and your Attorney-in-Fact must complete Sections 6 and 7. **You MUST sign and date this form within 90 days of receipt by Fidelity in the presence of two separate witnesses and a notary public.**
- This form appoints an Attorney-in-Fact for one person. Joint contract owners or other individuals must complete a separate form.
- Check the laws of your state for any additional requirements. **Residents of CA, ME, MI, and PA:** see additional notices at the end of the document that you, and in some cases your Attorney-in-Fact, may be required to review and complete.
- This form cannot be used to add an individual who will be paid for the investment management of the account(s).

Trust Accounts

- You must also provide your initials in Section 3, Optional Powers, to indicate you are delegating your fiduciary powers in connection with a trust.

1. Contract Owner

Phone numbers are for questions about this request only; they will not update your Fidelity contact information.

First Name	Middle Name	Last Name
Social Security or Taxpayer ID Number		Phone
		Extension

2. Contract(s) Included

Eligible annuity contracts include ONLY those issued by Fidelity Investments Life Insurance Company and, in New York, Empire Fidelity Investments Life Insurance Company only. **Annuity contracts purchased through the Fidelity Insurance Network[®] or issued by Brighthouse Life Insurance Company or MetLife Insurance Company require a different form.**

If you do NOT check this box, we will only list the Attorney-in-Fact on the eligible contracts listed below.

- ALL eligible annuity contracts (see above) currently maintained at Fidelity that are owned by you, either individually or jointly, as evidenced by the fact that the Social Security number noted above is associated with the contract.

OR

ONLY these contracts: Do not list contract numbers here if you checked the "ALL eligible annuity contracts" box above.

List contracts that you want this form to apply to. To appoint a different Attorney-in-Fact for other eligible contracts, make a copy of this form.

Contract Number	Contract Number	Contract Number

Form continues on next page. ▶▶

3. Powers to Be Granted

Powers granted by the contract owner identified in Section 1.

Standard Powers

By completing this form, you grant all these powers to the Attorney-in-Fact identified in Section 6.

- **Exchange, transfer, or remove money from your contract (to the extent allowed by your contract)** Exchange the contract for another one; make exchanges among investment options; cancel, pledge, or assign the contract to new owners; make partial or full withdrawals (surrenders); convert to an income stream (annuitization); distribute assets to any party, including your Attorney-in-Fact.
- **Change who receives contract benefits** Add, remove, or replace beneficiaries (including the Attorney-in-Fact him/herself), make assignments (change who receives income or certain other benefits).
- **Get contract information** Request and receive information about the contract's cash surrender value, withdrawal value, and death benefit.
- **Change addresses** Change the legal or mailing address on the contracts.
- **Answer for tax matters:** Make, execute, present, modify, and exercise any certification (including, without limitation, IRS Forms W-8 and W-9 and any substitutes for or successors to those forms) or election available or required under federal, state, local, or foreign tax law related to the contract(s) to the extent permitted by the applicable taxing authority.

Optional Powers

The Attorney-in-Fact identified in Section 6 will only be granted this power if you write your initials next to the option below.

Required for trust accounts. ▶

Contract Owner Initials

Delegate fiduciary powers in connection with a trust *Exercise the aforementioned "Standard Powers" in connection with such trust.*

4. Duplicate Materials

Check **ONLY** one.

- Send copies of account statements, transaction confirmations, and related prospectuses to your Attorney-in-Fact. *Materials will be sent by U.S. mail.*
- Do NOT send copies of account statements, transaction confirmations, and related prospectuses to your Attorney-in-Fact. ▶ *Default if no choice is indicated.*

5. Remove the Existing Attorney(s)-in-Fact

Complete this section **ONLY** if you want to remove any or all of your existing Attorney(s)-in-Fact from your contract(s). If you do not want to make any changes to your existing Attorney(s)-in-Fact, skip to Section 6. If you are not appointing a new Attorney-in-Fact with this form, skip to section 8, and no notary or witness is required.

- Remove ALL existing Attorney(s)-in-Fact.
- Remove **ONLY** the following Attorney(s)-in-Fact

Name(s)

6. Add an Attorney-in-Fact

Sections 6 and 7 must be completed by the Attorney-in-Fact. Individuals who are being paid for their investment management of the contract(s) are not permitted.

Provide your full legal name.

First Name	Middle Name	Last Name		
Social Security or Taxpayer ID Number	Date of Birth MM DD YYYY	Daytime Phone		Extension

Residential Address (where you live)

Cannot be a P.O. Box, Mail Drop, or c/o.

Address			
City	State/Province	ZIP/Postal Code	Country

Add an Attorney-in-Fact continues on next page. ▶▶



Mailing Address

Same as residential address

Address			
City	State/Province	ZIP/Postal Code	Country

7. Attorney-in-Fact Signature and Date *Named Attorney-in-Fact must sign and date this section within 90 days of receipt by Fidelity in the presence of a notary public.*

In this Section 7, "You," "you," and "your" refer to the Attorney-in-Fact. By signing below, you:

- Affirm that you have read, and that you understand and agree to be bound by, the provisions of this form, as well as, terms of the annuity contract and any applicable state notices.
- Affirm that you are the Attorney-in-Fact named in Section 6.
- Accept appointment as Attorney-in-Fact for the owner identified in Section 1, according to all terms and conditions described in this form.
- Agree that any information given on this Durable Power of Attorney is subject to verification. You authorize Fidelity Investments Life Insurance Company and/or Empire Fidelity Investments Life Insurance Company and their agents, affiliates, assigns, control persons, employees, successor custodians, officers and directors (collectively, "Fidelity") to act on all instructions given on this form, to obtain a credit or other financial responsibility report on yourself and upon written request, to provide the name and address of the credit reporting agency used.
- Affirm that the contract owner is not deceased, has not partially or totally revoked, suspended, or terminated the authority delegated and that there is no petition pending to determine the incapacity or to appoint a guardian for the contract owner.
- Agree not to issue or relay any instructions that you believe to be inconsistent with your powers or responsibilities as Attorney-in-Fact.
- Agree to avoid conflicts that would impair your ability to act in the contract owner's best interest.
- Agree to keep the contract owner's property separate from any assets you own or control, unless otherwise permitted by law.
- Agree to keep a record of all receipts, payments, and transactions conducted for the contract owner.
- Agree to identify yourself as Attorney-in-Fact when signing documents on behalf of the contract owner, using either of these accepted forms: "[contract owner name] by [your signature] as Agent," or "[your signature] as Agent for [contract owner name]".
- Indemnify and hold harmless Fidelity from and against any and all losses, liabilities, claims, and costs (including reasonable attorneys' fees) resulting from transactions made in accordance with your instructions.
- Agree that Fidelity may restrict or suspend your ability to remove money from the contracts listed in Section 2.
- Agree to serve as Attorney-in-Fact, and acknowledge that this POA remains in full force and effect, until Fidelity has received what it considers to be satisfactory written notice of either the contract owner's death or your removal or resignation as Attorney-in-Fact. Written notice to the contract owner and to any co-agent, successor agent, or the contract owner's guardian (if one has been appointed), will ordinarily constitute satisfactory notice of resignation.
- Agree to cease acting as Attorney-in-Fact if you know, or have reason to know, that your capacity to act as Attorney-in-Fact has been limited or terminated for any reason.
- In the event that more than one Attorney-in-Fact is named, represent that you are authorized to act severally or individually, and that Fidelity may follow any of your instructions independent of all other Attorneys-in-Fact, including the delivery of assets to you personally.
- Understand that in the event of any conflict between instructions given by a contract owner and an Attorney-in-Fact, Fidelity may restrict the contract until it has received joint written instructions that it finds satisfactory.
- Certify that you will not be paid for the investment management related to the contract(s).

This durable POA shall be governed by Utah law, except with respect to its conflict of laws provisions.

Sign **ONLY** in the presence of a notary.

PRINT ATTORNEY-IN-FACT NAME		<i>Initial here to confirm that you will not be paid for the investment management of the contract(s).</i> Required ► Attorney-in-Fact Initials
ATTORNEY-IN-FACT SIGNATURE	DATE MM/DD/YYYY	
SIGN X	X	

Attorney-in-Fact Signature and Date continues on next page. ►►

Important Note: CA Notaries are permitted to submit a separate page notary document. If used, it must identify the document being notarized.

Notice to CA Residents: A Notary Public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

Certificate of Acknowledgment of Notary Public *Must be a U.S. notary. Foreign notary or consular seals may NOT be substituted.*

State of _____, in the County of _____, subscribed and sworn to before me by the above-named Attorney-in-Fact who is personally known to me or who has produced _____ as identification, that the foregoing statements were true and accurate and made of his/her own free act and deed, on ____/____/____.

PRINT NOTARY NAME	
NOTARY SIGNATURE	DATE MM/DD/YYYY
SIGN X	X

NOTARY SEAL / STAMP

My commission expires ____/____/____.

8. Contract Owner Signature and Date *Contract owner must sign and date this section within 90 days of receipt at Fidelity. If appointing a new Attorney-in-Fact, the owner must sign and date this form in the presence of a notary public and two witnesses.*

By signing below, you:

- Affirm that you have read, and that you understand and agree to be bound by, the provisions of this form and any applicable state notices.
- Authorize Fidelity Investments Life Insurance Company and/or Empire Fidelity Investments Life Insurance Company and their agents, affiliates, assigns, control persons, employees, successor custodians, officers and directors (collectively, "Fidelity") to act on all instructions given on this form.
- Affirm that you appoint the individual identified in Section 6 as your agent and Attorney-in-Fact, granting all powers identified in Section 3 with respect to all contracts identified in Section 2, including any powers specifically granted by you by writing your initials next to them.
- Ratify and confirm all instructions given by your Attorney-in-Fact to the extent permitted by this form and any applicable contract agreements.
- Certify that you are the registered owner of the contract(s) identified in Section 2, and that all information you provided is correct.
- Acknowledge that Fidelity has not offered you any tax or legal advice (including advice as to whether this agreement satisfies the laws of your state), and affirm that you have consulted with your attorney prior to executing this form about any aspects of this form that you did not understand.
- Warrant and represent that if you have delegated to your Attorney-in-Fact the

authority to exercise fiduciary powers in connection with a trust in Section 3, that you are permitted as the trustee under the governing trust instrument to hire agents and delegate all authority as outlined herein.

- Acknowledge that Fidelity has no duty to, and does not, monitor the activities of your Attorney-in-Fact.
- Authorize Fidelity to send duplicate statements to your Attorney-in-Fact if indicated in Section 4.
- Agree to be responsible for all costs and obligations incurred in connection with the contracts identified in Section 2 by your Attorney-in-Fact, including any costs and obligations that remain unpaid at the time an Attorney-in-Fact ceases to serve in that capacity for any reason.
- Indemnify and hold Fidelity harmless from and against any and all losses, liabilities, claims, and costs (including reasonable attorney fees) that are in any way connected with your instructions or with any action or instruction of your Attorney-in-Fact, even if your Attorney-in-Fact's authorization has been terminated but Fidelity has not yet received notice of the termination. (The indemnifications in this bullet are in addition to, and do not limit, any rights that Fidelity may have under any other agreement with you.)
- Agree that to induce any third party (collectively, "Third Parties") to act, any such Third Parties receiving a duly executed copy or facsimile of this POA may act upon it, and

that revocation or termination hereof shall be ineffective as to Third Parties, unless and until actual written notice of such revocation or termination shall have been received by such Third Parties.

- Affirm that you understand that your Attorney-in-Fact may be entitled to receive compensation out of your contracts for services performed.
- Agree that this form is in addition to (and in no way limits or restricts) any and all rights which Fidelity may have under any other agreement or agreements between Fidelity and you, and shall inure and continue in favor of Fidelity, its successors (by merger, consolidation, or otherwise) and assigns.
- Certify that you are not adding an individual who will be paid for his or her investment management of the contract(s).

Contracts with multiple Attorneys-in-Fact

- Authorize each Attorney-in-Fact to act alone (severally) and without the consent of any other Attorney-in-Fact, with respect to each power granted in this form.
- Notwithstanding the previous bullet, acknowledge that Fidelity may freeze all activity on your contract(s) if Fidelity receives conflicting or inconsistent instructions from your Attorneys-in-Fact, and that your contracts will remain frozen until the conflict is resolved by either a) written instructions from you, b) joint written instructions from all Attorneys-in-Fact, or c) a court order instructing Fidelity how to proceed.

Contract Owner Signature and Date continues on next page. ►►



This durable POA shall be governed by Utah law, except with respect to its conflict of laws provisions.

You must sign and date this form in the presence of two witnesses and a notary who must also sign below. Note: Your Attorney-in-Fact cannot also act in the capacity of a witness.

PRINT OWNER NAME	
OWNER SIGNATURE	DATE MM/DD/YYYY
SIGN X	X

PRINT WITNESS NAME	
WITNESS SIGNATURE	DATE MM/DD/YYYY
SIGN X	X

PRINT WITNESS NAME	
WITNESS SIGNATURE	DATE MM/DD/YYYY
SIGN X	X

Important Note: CA Notaries are permitted to submit a separate page notary document. If used, it must identify the document being notarized.

Notice to CA Residents: A Notary Public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

Certificate of Acknowledgement of Notary Public *Must be a U.S. notary. Foreign notary or consular seals may NOT be substituted.*

State of _____, in the County of _____, subscribed and sworn to before me by the above-named contract owner who is personally known to me or who has produced _____ as identification, that the foregoing statements were true and accurate and made of his/her own free act and deed, on ___/___/____.

PRINT NOTARY NAME	
NOTARY SIGNATURE	DATE MM/DD/YYYY
SIGN X	X

NOTARY SEAL / STAMP

My commission expires ___/___/____.

Did you sign the form and attach any necessary documents? Send the ENTIRE form and any attachments to Fidelity Investments.

CA, ME, MI, and PA residents Read and, if applicable, sign and return state disclosures.

Questions? Go to Fidelity.com/poa or call 1-800-634-9361.

Regular mail
Annuity Service Center
P.O. Box 770001
Cincinnati, OH 45277-0050

Overnight mail
Fidelity Investments
100 Crosby Parkway, KC2Q
Covington, KY 41015

Fidelity insurance products are issued by Fidelity Investments Life Insurance Company (FILI), and in New York, by Empire Fidelity Investments Life Insurance Company,® New York, N.Y. FILI is licensed in all states except New York. A contract's financial guarantees are subject to the claims-paying ability of the issuing insurance company.

Fidelity Brokerage Services LLC, Member NYSE, SIPC. 493079.13.0 (7/18)



Notice to Person Executing Durable Power of Attorney

This notice must also be read and signed by the Attorney-in-Fact.

A durable power of attorney is an important legal document. By signing the durable power of attorney, you are authorizing another person to act for you, the principal. Before you sign this durable power of attorney, you should know these important facts:

Your agent (Attorney-in-Fact) has no duty to act unless you and your agent agree otherwise in writing.

This document gives your agent the powers to manage, dispose of, sell, and convey your real and personal property, and to use your property as security if your agent borrows money on your behalf. This document does not give your agent the power to accept or receive any of your property, in trust or otherwise, as a gift, unless you specifically authorize the agent to accept or receive a gift.

Your agent will have the right to receive reasonable payment for services provided under

this durable power of attorney unless you provide otherwise in this power of attorney.

The powers you give your agent will continue to exist for your entire lifetime, unless you state that the durable power of attorney will last for a shorter period of time or unless you otherwise terminate the durable power of attorney. The powers you give your agent in this durable power of attorney will continue to exist even if you can no longer make your own decisions respecting the management of your property.

You can amend or change this durable power of attorney only by executing a new durable power of attorney or by executing an amendment through the same formalities as an original.

You have the right to revoke or terminate this durable power of attorney at any time, so long as you are competent.

This durable power of attorney must be dated and must be acknowledged before a notary public or signed by two witnesses. If

it is signed by two witnesses, they must witness either:

1. The signing of the power of attorney.
2. The principal's signing or acknowledgment of his or her signature.

A durable power of attorney that may affect real property should be acknowledged before a notary public so that it may easily be recorded.

You should read this durable power of attorney carefully. When effective, this durable power of attorney will give your agent the right to deal with property that you now have or might acquire in the future. The durable power of attorney is important to you. If you do not understand the durable power of attorney, or any provision of it, then you should obtain the assistance of an attorney or other qualified person.

Notice to Person Accepting the Appointment as Attorney-in-Fact

By acting or agreeing to act as the agent (Attorney-in-Fact) under this power of attorney you assume the fiduciary and other legal responsibilities of an agent. These responsibilities include:

1. The legal duty to act solely in the interest of the principal and to avoid conflicts of interest.
2. The legal duty to keep the principal's property separate and distinct from any other property owned or controlled by you.

You may not transfer the principal's property to yourself without full and adequate consideration or accept a gift of the principal's property unless this power of attorney specifically authorizes you to transfer property to yourself or accept a gift of the principal's property. If you transfer the principal's property to yourself without specific authorization in the power of attorney, you may be prosecuted for fraud and/or embezzlement. If the principal is 65 years of age or older at

the time that the property is transferred to you without authority, you may also be prosecuted for elder abuse under Penal Code Section 368. In addition to criminal prosecution, you may also be sued in civil court.

I have read the foregoing notice and I understand the legal and fiduciary duties that I assume by acting or agreeing to act as the agent (Attorney-in-Fact) under the terms of this power of attorney.

PRINT AGENT/ATTORNEY-IN-FACT NAME	
AGENT/ATTORNEY-IN-FACT SIGNATURE	DATE MM/DD/YYYY
SIGN X	X

Important Notice to the Contract Owner

As the Contract Owner, you are using this power of attorney to grant power to another person (called the Agent) to make decisions about your property and to use your property on your behalf. Under this power of attorney you give your Agent broad and sweeping powers to sell or otherwise dispose of your property without notice to you. Under this document your Agent will continue to have these powers after you become incapacitated. The powers that you give your Agent are explained more fully in the Maine Uniform Power of Attorney Act, Maine Revised Statutes, Title 18-A, Article 5, Part 9. You have the right to revoke this power of attorney at any time as long as you are not incapacitated. If there is anything about this power of attorney that you do not understand you should ask a lawyer to explain it to you.

Important Notice to the Agent

As the "Agent" you are given power under this power of attorney to make decisions about the property belonging to the Principal and to dispose of the Principal's property on the Principal's behalf in accordance with the terms of this power of attorney. This power of attorney is valid only if the Principal is of sound mind when the Principal signs it. When you accept the authority granted under this power of attorney a special legal relationship is created between you and the Principal. This relationship imposes upon you legal duties that continue until you resign or the power of attorney is terminated or revoked. The duties are more fully explained in the Maine Uniform Power of Attorney Act, Maine Revised Statutes, Title 18-A, Article 5, Part 9. As the Agent, you are generally not entitled to use the Principal's property for your own benefit or to make gifts to yourself or others unless the power of attorney gives

you such authority. If you violate your duty under this power of attorney you may be liable for damages and may be subject to criminal prosecution.

You must stop acting on behalf of the Principal if you learn of any event that terminates this power of attorney or your authority under this power of attorney. Events of termination are more fully explained in the Maine Uniform Power of Attorney Act and include, but are not limited to, revocation of your authority or of the power of attorney by the Principal, the death of the Principal or the commencement of divorce proceedings between you and the Principal. If there is anything about this power of attorney or your duties under it that you do not understand you should ask a lawyer to explain it to you.

Notice for Michigan Residents Pursuant to MCLS § 700.5501 (2012)

Important Notice to Attorney-in-Fact

This notice must be read and signed by the Attorney-in-Fact.

I, _____,
have been appointed as Attorney-in-Fact for

_____ the principal, under a durable power of

attorney dated _____. By signing this document, I acknowledge that if and when I act as Attorney-in-Fact, all the following apply:

- Except as provided in the durable power of attorney, I must act in accordance with the standards of care applicable to fiduciaries acting under durable powers of attorney.

- I must take reasonable steps to follow the instructions of the principal.
- Upon request of the principal, I must keep the principal informed of my actions. I must provide an accounting to the principal upon request of the principal, to a guardian or conservator appointed on behalf of the principal upon the request of that guardian or conservator, or pursuant to judicial order.
- I cannot make a gift from the principal's property, unless provided for in the durable power of attorney or by judicial order.
- Unless provided in the durable power of attorney or by judicial order, I, while acting as Attorney-in-Fact, shall not create an account or other asset in joint tenancy between the principal and me.

- I must maintain records of my transactions as Attorney-in-Fact, including receipts, disbursements, and investments.
- I may be liable for any damage or loss to the principal, and may be subject to any other available remedy, for breach of fiduciary duty owed to the principal. In the durable power of attorney, the principal may exonerate me of any liability to the principal for breach of fiduciary duty except for actions committed by me in bad faith or with reckless indifference. An exoneration clause is not enforceable if inserted as the result of my abuse of a fiduciary or confidential relationship to the principal.
- I may be subject to civil or criminal penalties if I violate my duties to the principal.

PRINT ATTORNEY-IN-FACT NAME	
ATTORNEY-IN-FACT SIGNATURE	DATE MM/DD/YYYY
SIGN X	X

Notice for Pennsylvania Residents Pursuant to 20 PA.C.S.A. § 5601.

Notice

THIS NOTICE MUST BE SIGNED BY THE CONTRACT OWNER.

THE PERSON YOU DESIGNATE (YOUR "AGENT") MAY EXERCISE THE POWERS GIVEN HERE THROUGHOUT YOUR LIFETIME, EVEN AFTER YOU BECOME INCAPACITATED, UNLESS YOU EXPRESSLY LIMIT THE DURATION OF THESE POWERS OR YOU REVOKE THESE POWERS OR A COURT ACTING ON YOUR BEHALF TERMINATES YOUR AGENT'S AUTHORITY.

THE PURPOSE OF THIS POWER OF ATTORNEY IS TO GIVE YOUR AGENT BROAD POWERS TO HANDLE YOUR PROPERTY, WHICH MAY INCLUDE POWERS TO SELL OR OTHERWISE DISPOSE OF ANY REAL OR PERSONAL PROPERTY WITHOUT ADVANCE NOTICE TO YOU OR APPROVAL BY YOU.

THIS POWER OF ATTORNEY DOES NOT IMPOSE A DUTY ON YOUR AGENT TO EXERCISE GRANTED POWERS, BUT WHEN POWERS ARE EXERCISED, YOUR AGENT MUST USE DUE CARE TO ACT FOR YOUR BENEFIT AND IN ACCORDANCE WITH THIS POWER OF ATTORNEY.

YOUR AGENT MUST ACT IN ACCORDANCE WITH YOUR REASONABLE EXPECTATIONS TO THE EXTENT ACTUALLY KNOWN BY YOUR AGENT AND, OTHERWISE, IN YOUR BEST INTEREST, ACT IN GOOD FAITH AND ACT ONLY WITHIN THE SCOPE OF AUTHORITY GRANTED BY YOU IN THE POWER OF ATTORNEY.

THE LAW PERMITS YOU, IF YOU CHOOSE, TO GRANT BROAD AUTHORITY TO AN AGENT UNDER POWER OF ATTORNEY, INCLUDING THE ABILITY TO GIVE AWAY ALL OF YOUR PROPERTY WHILE YOU ARE ALIVE OR TO SUBSTANTIALLY CHANGE HOW YOUR PROPERTY IS

DISTRIBUTED AT YOUR DEATH. BEFORE SIGNING THIS DOCUMENT, YOU SHOULD SEEK THE ADVICE OF AN ATTORNEY AT LAW TO MAKE SURE YOU UNDERSTAND IT.

A COURT CAN TAKE AWAY THE POWERS OF YOUR AGENT IF IT FINDS YOUR AGENT IS NOT ACTING PROPERLY.

THE POWERS AND DUTIES OF AN AGENT UNDER A POWER OF ATTORNEY ARE EXPLAINED MORE FULLY IN 20 PA.C.S. CH. 56.

IF THERE IS ANYTHING ABOUT THIS FORM THAT YOU DO NOT UNDERSTAND, YOU SHOULD ASK A LAWYER OF YOUR OWN CHOOSING TO EXPLAIN IT TO YOU.

I HAVE READ OR HAD EXPLAINED TO ME THIS NOTICE AND I UNDERSTAND ITS CONTENTS.

PRINT OWNER NAME	
OWNER SIGNATURE	DATE MM/DD/YYYY
SIGN X	X

Agent Acknowledgment

I ACKNOWLEDGE THAT I HAVE READ THE ATTACHED POWER OF ATTORNEY AND AM THE PERSON IDENTIFIED AS THE AGENT FOR THE PRINCIPAL. I HEREBY

ACKNOWLEDGE THAT WHEN I ACT AS AGENT:

I SHALL ACT IN ACCORDANCE WITH THE PRINCIPAL'S REASONABLE EXPECTATIONS TO THE EXTENT ACTUALLY KNOWN BY

ME AND, OTHERWISE, IN THE PRINCIPAL'S BEST INTEREST, ACT IN GOOD FAITH AND ACT ONLY WITHIN THE SCOPE OF AUTHORITY GRANTED TO ME BY THE PRINCIPAL IN THE POWER OF ATTORNEY.

PRINT AGENT NAME	
AGENT SIGNATURE	DATE MM/DD/YYYY
SIGN X	X