

# Springing Power of Attorney

## Principal Information

Name

Address

Phone Number

## Attorney-in-Fact Information

Name

Address

Phone Number

## Effective Condition

The Power of Attorney shall become effective upon

## Powers Granted

Description of Powers

## Special Instructions (if any)

# Signatures

Principal's Signature

Date

Attorney-in-Fact's Signature

Date

# Notary Public

Name

Commission Number

My Commission Expires

Seal/Signature