CONNECTICUT DURABLE POWER OF ATTORNEY

NOTICE: THE POWERS GRANTED BY THIS DOCUMENT ARE BROAD AND SWEEPING. THEY ARE DEFINED IN THE CONNECTICUT UNIFORM POWER OF ATTORNEY ACT, WHICH EXPRESSLY PERMITS THE USE OF ANY OTHER OR DIFFERENT FORM OF POWER OF ATTORNEY DESIRED BY THE PARTIES CONCERNED. THE GRANTOR OF ANY POWER OF ATTORNEY OR THE AGENT MAY MAKE APPLICATION TO A COURT OF PROBATE FOR AN ACCOUNTING AS PROVIDED IN SUBSECTION (b) OF SECTION 45a-175 OF THE CONNECTICUT GENERAL STATUTES. THIS POWER OF ATTORNEY DOES NOT AUTHORIZE THE AGENT TO MAKE HEALTH CARE DECISIONS FOR YOU.

KNOW ALL PEOPLE BY THESE PRESENTS, which are intended to constitute a GENERAL POWER OF ATTORNEY pursuant to the Connecticut Uniform Power of Attorney Act:

That I,		
	Insert Name and Address of Principal	
Do hereby appoint		

Insert Name and Address(es) of Agent(s)

My agent(s) TO ACT _

If more than one agent is designated and the principal wishes each agent alone to be able to exercise the power conferred, insert in this blank the word "severally". Failure to make any insertion or the insertion of the word "severally" shall require the agents to act jointly.

First: In my name, place and stead in any way which I myself could do, if I were personally present, with respect to the following matters as each of them is defined in the Connecticut Uniform Power of Attorney Act to the extent that I am permitted by law to act through an agent:

[Strike out and initial in the opposite box any one or more of the subdivisions as to which the principal does NOT desire to give the agent authority. Such elimination of any one or more of subdivisions (A) to (M), inclusive, shall automatically constitute an elimination of subdivision (N).]

To strike out any subdivision the principal must draw a line through the text of that subdivision AND write «his/her» initials in the box opposite.

(A)	Real property;	[]
(B)	Tangible personal property;	[]
(C)	Stocks and bonds;	[]
(D)	Commodities and options;	[]
(E)	Banks and other financial institutions;	[]
(F)	Operation of entity of business;	[]
(G)	Insurance and annuities;	[]
(H)	Estates, trusts and other beneficial interests	[]
(I)	Claims and litigation;	[]
(J)	Personal and family maintenance;	[]
(K)	Benefits from governmental programs or civil or military service;	[]
(L)	Retirement plans;	[]
(M)	Taxes;	[]
(N)	All other matters;	[]
	(Special Provisions and limitations may be included in the statutory short form power of attorney only if they conform to the requirements of the Connecticut Uniform Power of Attorney Act.)		

OPTIONAL ESTATE PLANNING POWERS:

YOU SHOULD SEEK LEGAL ADVICE BEFORE INCLUDING THE FOLLOWING POWERS:

CAUTION: Granting any of the following will give your agent the authority to take action 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.

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

(0)	Create, amend, revoke or terminate an inter vivos trust, provided in the case of a trust established for a disabled person pursuant to 42 USC $1396p(d)(4)(A)$ or 42 USC $1396p(d)(4)(C)$, the creation of such trust by an agent shall be only as permitted by federal law.]
(P)	Make a gift, subject to the limitations of the Connecticut Uniform Power of Attorney Act and any special instructions in this power of attorney. Unless otherwise provided in the special instructions, gifts per recipient may not exceed the annual dollar limits of the federal gift tax exclusion under Internal Revenue Code Section 2503(b), or if the principal's spouse agrees to consent to a split gift pursuant to Internal Revenue Code Section 2513, in an amount per recipient not to exceed twice the annual federal gift tax exclusion limit. In addition, an Agent must determine that gifts are consistent with the principal's objectives if actually known by the agent and, if unknown, as the agent determines is consistent with the principal's best interest based on all relevant factors.	[]
(Q)	Create or change rights of survivorship.	[]
(R)	Create or change a beneficiary designation.	[]
(S)	Authorize another person to exercise the authority granted under this power of attorney.	[]
(T)	Waive the principal's right to be a beneficiary of a joint and survivor annuity, including a survivor benefit under a retirement plan.	[]
(U)	Exercise fiduciary powers that the principal has authority to delegate.	[]
(V)	Disclaim or refuse an interest in property, including a power of appointment.	[]
(W)	To exercise all powers I may have over any computer, telephone, digital device, data storage device, user account, electronically stored information, and any domain name, whether the same are in my own name or that I own or lawfully use jointly with anyone else; to access, manage, control, delete and terminate any such asset or account, including, but not limited to, e-mail, telephone, bank, brokerage, investment, insurance, social networking, internet service provider, retail vendor, utilities and other accounts; to change my username and password to gain access to such accounts and information; to transfer or withdraw funds or other assets among or from such accounts; and to open new accounts in my nam all as my attorney determines is necessary or advisable. I hereby give my lawful consent and fully authorize my attorney to access, manage, control, delete and term any electronically stored information and communications to the fullest extent allounder the Electronic Communications Privacy Act of 1986, as amended, the Comp Fraud and Abuse Act of 1986, as amended, the Gramm-Leach-Bliley Act, as amended.	nina wab pute	ole r

and any other federal, state or international privacy or other laws, and to take any actions I am authorized to take under all applicable terms of service, terms of use, licensing and other account agreements or laws. To the extent a specific reference to any federal, state, local or international law is required in order to give effect to this provision, I specifically provide that my intention is to so reference such law, whether it is now in existence or comes into existence or is amended after the date of this document. []

Second: With full and unqualified authority to delegate any and all of the foregoing powers to any person or persons whom my agent(s) shall select;

Third: Hereby ratifying and confirming all that said agent(s) or substitute(s) do or cause to be done.

Fourth: LIMITATION ON AGENT'S AUTHORITY. An agent that is not my ancestor, spouse, or descendant MAY NOT use my property to benefit the agent or a person to whom the agent owes an obligation of support unless I have included that authority in the special instructions.

Fifth: DESIGNATION OF SUCCESSOR AGENT(S) (OPTIONAL)

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:

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

Name of Second Successor Agent: _____

Second Successor Agent's Address: _____

Sixth: EFFECTIVE DATE This power of attorney is effective immediately unless I have stated otherwise in the special instructions.

IN WITNESS WHEREOF, I have hereunto signed my name and affixed my seal this _____ day of _____, 20____.

Witness

Signature of Principal

[Seal]

Witness

STATE OF CONNECTICUT

COUNTY of

Personally appeared, (**the principal**), signer of the foregoing instrument, and acknowledged the same to be «his/her» free act and deed, before me, on this _____ day of _____, 20___.

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