

Document Number

POWER OF ATTORNEY
Document Title

Recording Area
Name and Return Address

Parcel Identification Number (PIN)

*This information must be completed by submitter: document title, name & return address, and PIN (if required). Other information such as the granting clauses, legal description, etc. may be placed on this first Page of the document or may be placed on additional Pages of document. Note: use of this cover Page adds one Page to your document and \$2.00 to the recording fee. Wisconsin Statutes, 59.517. WRDA 2/96.

WISCONSIN BASIC POWER OF ATTORNEY FOR FINANCES AND PROPERTY

Section 243.07, Wis. Stats.

POWER OF ATTORNEY

REQUIREMENTS: A Wisconsin basic power of attorney for finance and property is legally sufficient under this section if the included form is completed and the signature of the principal is acknowledged and the signature of the agent is obtained.

COPIES: A copy of a completed Wisconsin basic power of attorney for finances and property form has the same force and effect as the original.

RELATION TO POWER OF ATTORNEY FOR HEALTH CARE: The execution of a Wisconsin basic power of attorney for finances and property under this section does not confer on the agent any of the powers or duties conferred on a health care agent by the power of attorney for health care under chapter 155.

AMENDMENT, REVOCATION AND INVALIDATION OF BASIC POWER OF ATTORNEY FOR FINANCES AND PROPERTY: (a) A principal may amend a Wisconsin basic power of attorney for finances and property only by revoking that power of attorney and completing a new basic power of attorney for finances and property.

(b) A principal may revoke a Wisconsin basic power of attorney for finances and property and invalidate it at any time by destroying it, by directing another person to destroy it in the principal's presence or by signing a written and dated statement expressing the principal's intent to revoke. If the agent under the Wisconsin basic power of attorney for finances and property is the principal's spouse and the marriage is annulled, or the agent and the principal are divorced, after signing the document, the Wisconsin basic power of attorney for finances and property is invalid.

DEFINITIONS

"Durable power of attorney," Sec. 243.07(1)(a), Wis. Stats., means a power of attorney by which a principal designates another as his or her agent in writing and the writing contains the words "this power of attorney shall not be affected by subsequent disability, or incapacity of the principal", or "this power of attorney shall become effective upon the disability or incapacity of the principal", or similar words showing the intent of the principal that the authority conferred shall be exercised notwithstanding the principal's subsequent disability, or incapacity.

"Incapacity" means the inability to receive and evaluate information effectively or to communicate decisions to such an extent that the individual lacks the capacity to manage his or her decisions.

NOT AFFECTED BY PASSAGE OF TIME: The passage of time does not revoke a durable power of attorney unless the durable power of attorney states a time of revocation.

DURABLE POWER OF ATTORNEY NOT AFFECTED BY DISABILITY: All acts done by an agent pursuant to a durable power of attorney during any period of disability or incapacity of the principal have the same effect and inure to the benefit of and bind the principal and his or her successors in interest as if the principal were competent and not disabled.

**WISCONSIN BASIC POWER OF ATTORNEY
FOR FINANCES AND PROPERTY
SECTION 243.10**

NOTICE: THIS IS AN IMPORTANT DOCUMENT. BEFORE SIGNING THIS DOCUMENT, YOU SHOULD KNOW THESE IMPORTANT FACTS. BY SIGNING THIS DOCUMENT, YOU ARE NOT GIVING UP ANY RIGHTS TO CONTROL YOUR FINANCES AND PROPERTY YOURSELF. IN ADDITION TO YOUR OWN POWERS AND RIGHTS, YOU ARE GIVING ANOTHER PERSON, YOUR AGENT, BROAD POWERS TO HANDLE YOUR FINANCES AND PROPERTY. THIS BASIC POWER OF ATTORNEY FOR FINANCES AND PROPERTY MAY GIVE THE PERSON WHOM YOU DESIGNATE (YOUR "AGENT") BROAD POWERS TO HANDLE YOUR FINANCES AND PROPERTY, WHICH MAY INCLUDE POWER TO ENCUMBER, SELL OR OTHERWISE DISPOSE OF ANY REAL OR PERSONAL PROPERTY WITHOUT ADVANCE NOTICE TO YOU OR APPROVAL BY YOU. THE POWERS WILL EXIST AFTER YOU BECOME DISABLED, OR INCAPACITATED, IF YOU CHOOSE THAT PROVISION. THIS DOCUMENT DOES NOT AUTHORIZE ANYONE TO MAKE MEDICAL OR OTHER HEALTH CARE DECISIONS FOR YOU. IF YOU OWN COMPLEX, OR SPECIAL ASSETS SUCH AS A BUSINESS, OR IF THERE IS ANYTHING ABOUT THIS FORM THAT YOU DO NOT UNDERSTAND, YOU SHOULD ASK A LAWYER TO EXPLAIN THIS FORM TO YOU BEFORE YOU SIGN IT.

IF YOU WISH TO CHANGE YOUR BASIC POWER OF ATTORNEY FOR FINANCES AND PROPERTY, YOU MUST COMPLETE A NEW DOCUMENT AND REVOKE THIS ONE. YOU MAY REVOKE THIS DOCUMENT AT ANY TIME BY DESTROYING IT, BY DIRECTING ANOTHER PERSON TO DESTROY IT IN YOUR PRESENCE OR BY SIGNING A WRITTEN AND DATED STATEMENT EXPRESSING YOUR INTENT TO REVOKE THIS DOCUMENT. IF YOU REVOKE THIS DOCUMENT, YOU SHOULD NOTIFY YOUR AGENT AND ANY OTHER PERSON TO WHOM YOU HAVE GIVEN A COPY OF THIS FORM. YOU ALSO SHOULD NOTIFY ALL PERSONS HAVING CUSTODY OF YOUR ASSETS. THESE PARTIES HAVE NO RESPONSIBILITY TO YOU UNLESS YOU ACTUALLY NOTIFY THEM OF THE REVOCATION. IF YOUR AGENT IS YOUR SPOUSE AND YOUR MARRIAGE IS ANNULLED, OR YOU ARE DIVORCED AFTER SIGNING THIS DOCUMENT, THIS DOCUMENT IS INVALID.

SINCE SOME THIRD PARTIES OR SOME TRAFFICATIONS MAY NOT PERMIT USE OF THIS DOCUMENT, IT IS ADVISABLE TO CHECK IN ADVANCE, IF POSSIBLE, FOR ANY SPECIAL REQUIREMENTS THAT MAY BE IMPOSED.

YOU SHOULD SIGN THIS FORM ONLY IF THE AGENT YOU NAME IS RELIABLE, TRUSTWORTHY AND COMPETENT TO MANAGE YOUR AFFAIRS.

WISCONSIN BASIC POWER OF ATTORNEY FOR FINANCES AND PROPERTY

I, _____ (Name),
of _____ (Address),
appoint _____ (Name),
of _____ (Address),
as my agent to act for me in any lawful way with respect to the powers initialed below. If the person or persons
appointed are unable or unwilling to act as my agent, I appoint _____ (Name)
of _____ (Address),
to act for me in any lawful way with respect to the powers initialed below.

**TO GRANT ONE OR MORE OF THE FOLLOWING POWERS, INITIAL THE LINE IN FRONT OF EACH POWER YOU
ARE GRANTING. TO WITHHOLD A POWER, DO NOT INITIAL THE LINE IN FRONT OF IT. YOU MAY, BUT NEED
NOT, CROSS OUT EACH WITHHELD.**

HANDLING MY MONEY AND PROPERTY

Initials

- _____ 1. *PAYMENT OF BILLS:* My agent may make payments that are necessary or appropriate in connection with the administration of my affairs.
- _____ 2. *BANKING:* My agent may conduct business with financial institutions, including endorsing all checks and drafts made paying to my order and collecting the proceeds; signing in my name checks or orders on all accounts in my name or for my benefit; withdrawing funds from accounts in my name; opening accounts in my name; and entering into and removing articles from my safe deposit box.
- _____ 3. *INSURANCE:* My agent may obtain insurance of all types, as considered necessary or appropriate, settle and adjust insurance claims and borrow from insurers and 3rd parties using insurance policies as collateral.
- _____ 4. *ACCOUNTS:* My agent may ask for, collect and receive money, dividends, interest, legacies and property due or that may become due and owing to me and give receipt for those payments.
- _____ 5. *REAL ESTATE:* My agent may manage real property; sell, convey and mortgage realty for prices and on terms as considered advisable; foreclose mortgages and take title to property in my name; and execute deeds, mortgages, releases, satisfactions and other instruments relating to realty.
- _____ 6. *BORROWING:* My agent may borrow money and encumber my assets for loans as considered necessary.
- _____ 7. *SECURITIES:* My agent may buy, sell, pledge and exchange securities of all kinds in my name; sign and deliver in my name transfers and assignments of securities; and consent in my name to reorganizations, mergers or exchange of securities for new securities.
- _____ 8. *INCOME TAXES:* My agent may make and sign tax returns; represent me in all income tax matters before any federal, state or local tax collecting agency; and receive confidential information and perform any acts that I may perform, including receiving refund checks and the signing of returns.
- _____ 9. *TRUSTS:* My agent may transfer at any time any of my property to a living trust that has been established by me before the execution of this document.

PROFESSIONAL AND TECHNICAL ASSISTANCE

- _____ 10. *LEGAL ACTIONS:* My agent may retain attorneys on my behalf; appear for me in all actions and proceedings to which I may be a party; commence actions and proceedings in my name; and sign in my name all documents or pleadings of every description.

TO ESTABLISH WHEN, AND FOR HOW LONG, THE BASIC POWER OF ATTORNEY FOR FINANCES AND PROPERTY IS IN EFFECT, YOU MUST INITIAL ONLY ONE OF THE FOLLOWING 3 OPTIONS. IF YOU DO NOT INITIAL ONE, OR IF YOU INITIAL MORE THAN ONE, THIS BASIC POWER OF ATTORNEY FOR FINANCES AND PROPERTY WILL NOT TAKE EFFECT.

Initials

_____ This basic power of attorney for finances and property becomes effective when I sign it and will continue in effect as a durable power of attorney under Section 243.07, Wisconsin Statutes, if I become disabled or incapacitated.

_____ This basic power of attorney for finances and property becomes effective only when both of the following apply:

- a. I have signed it; and
- b. I become disabled and incapacitated.

_____ This basic power of attorney for finances and property becomes effective when I sign it BUT WILL CEASE TO BE EFFECTIVE IF I BECOME DISABLED OR INCAPACITATED.

I agree that any 3rd party who receives a copy of this document may act under it. Revocation of this basic power of attorney is not effective as to a 3rd party until the 3rd party learns of the revocation. I agree to reimburse the 3rd party for any loss resulting from claims that arise against the 3rd party because of reliance of this basic power of attorney.

Signed this _____ day of _____, _____ (year).

(Your Signature)

(Your Social Security Number)

By signing as a witness, I am acknowledging the signature of the principal who signed in my presence and the presence of the other witness; and the fact that he or she stated that this power of attorney reflects him or her wishes and is being executed voluntarily. I believe his or her to be of sound mind and capable of creating this power of attorney. I am not related to him or her by blood or marriage, and, to the best of my knowledge, I am not entitled to any portion of his or her estate under his or her will.

Witness: _____

Witness: _____

Dated: _____

Dated: _____

By: _____

By: _____

Print Name: _____

Print Name: _____

Address: _____

Address: _____

State of Wisconsin,

_____ County.

This document was acknowledged before me this _____ day of _____,

by _____ (Name of Principal).

(Signature of Notary Officer)

My commission is permanent or expires: _____

BY ACCEPTING OR ACTING UNDER THE APPOINTMENT, THE AGENT ASSUMES THE FIDUCIARY AND OTHER LEGAL RESPONSIBILITIES AND LIABILITIES OF AN AGENT.

(Name of Agent)

(Name of Agent)

(Signature of Agent)

(Signature of Agent)