NEBRASKA STATUTORY FORM POWER OF ATTORNEY
IMPORTANT INFORMATION

This power of attorney authorizes another person (your agent) to make decisions concerning your property for you (the principal). Your agent will be able to make decisions and act with respect to your property (including your money) whether or not you are able to act for yourself. The meaning of authority over subjects listed on this form is explained in the Nebraska Uniform Power of Attorney Act.

This power of attorney does not authorize the agent to make health care decisions for you.

You should select someone you trust to serve as your agent. Unless you specify otherwise, generally the agent’s authority will continue until you die or revoke the power of attorney or the agent resigns or is unable to act for you.

DESIGNATION OF AGENT

I, (name of principal), name the following personal
as my agent:

Name of Agent: ________________________________
Agent’s Address: ________________________________
Agent’s Telephone Number: ________________________________

DESIGNATION OF SUCCESSOR AGENT(S) (OPTIONAL)

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

Name of Successor Agent: ________________________________
Successor Agent’s Address: ________________________________
Successor Agent’s Telephone Number: ________________________________

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 ________________________________
Second Successor Agent’s Telephone Number:___________________________

Release of Information
I agree to, authorize, and allow full release of information, by any government agency, business, creditor, or their party who may have information pertaining to my assets or income, to my agent named herein.

GRANT OF GENERAL AUTHORITY

I grant my agent and any successor agent general authority to act for me with respect to the following subjects as defined in the Nebraska Uniform Power of Attorney Act:

- Real Property
- 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:

- Create, amend, revoke, or terminate an inter vivos trust
- Make a gift, subject to the limitations of the Nebraska Uniform Power of Attorney Act and any special instructions in this power of attorney
- Create or change rights of survivorship
- Create or change a beneficiary designation
Delegate to 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

Renounce or disclaim an interest in property, including a power of
appointment

LIMITATION OF AGENT’S AUTHORITY

Except as otherwise authorized by the Power of Personal and Family
Maintenance, an agent MAY NOT use my property to benefit the agent or a person to
who the agent owes an obligation of support unless I have included that authority in the
Special Instructions or the Grant of Specific Authority.

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.

NOMINATION OF [CONSERVATOR OR GUARDIAN] (OPTIONAL)

If it becomes necessary for a court to appoint a [conservator or guardian] of my
estate or [guardian] of my person, I nominate the following person(s) for appointment:

Name of Nominee for [conservator or guardian] of my estate:

Nominee’s Address: ________________________________
Nominee’s Telephone Number: ________________________________

Name of Nominee for [guardian] of my person:

Nominee’s Address: ________________________________
Nominee’s Telephone Number: ________________________________

RELIANCE ON THIS POWER OF ATTORNEY

Any personal, including my agent, may rely upon the validity of this power of
attorney or a copy of it unless that person knows it have terminated or is invalid.