NORTH DAKOTA DURABLE FINANCIAL POWER OF ATTORNEY

l,	, the principal, of	, State of
	, hereby designate	, of
my "attorney-i	, State of n-fact"), to act as initialed below, in n	, my attorney-in-fact (hereinafter ny name, in my stead and for my ers of attorney I may have executed in
	EFFECTIVE DA	TE
(Choose the a	applicable paragraph by placing your	initials in the preceding space)
the execution	. I grant my attorney-in-fact the powe of this document. These powers sha capacity I may experience in the futu	Il not be affected by any subsequent
or		
	. I grant my attorney-in-fact the powened in writing, by my attending physicancial affairs.	
	POWERS OF ATTORNE	EY-IN-FACT
•	n-fact shall exercise powers in my beattorney-in-fact shall have the following	· · · · · · · · · · · · · · · · · · ·
(Choose the a	applicable power(s) by placing your in	nitials in the preceding space)
withdraw fund personal and l fact's powers,	NKING - To receive and deposit fund s by check or otherwise to pay for go business expenses for my benefit. If my attorney-in-fact is authorized to e h banking institution.	oods, services, and any other
deposit box re including drilling to surrender of safe-deposit b	FE DEPOSIT BOX - To have accessented by me or to which I may have ang, if necessary, and to remove all or relinquish said safe-deposit box; are box may be located shall not incur an itting my attorney-in-fact to exercise	ccess, wheresoever located, any part of the contents thereof, and and any institution in which any such y liability to me or my estate as a
	ENDING OR BORROWING - To makename, individually or jointly with othe	



payment thereof any or all of my securities, real estate, personal property, or other property of whatever nature and wherever situated, held by me personally or in trust for my benefit. **GOVERNMENT BENEFITS** - To apply for and receive any government benefits for which I may be eligible or become eligible, including but not limited to, Social Security, Medicare and Medicaid. **RETIREMENT PLAN** - To contribute to, select payment option of, roll-over, and receive benefits of any retirement plan or IRA I may own, except my attorney-in-fact shall not have power to change the beneficiary of any of my retirement plans or IRAs. **TAXES** - To complete and sign any local, state and federal tax returns on my behalf, pay any taxes and assessments due and receive credits and refunds owed to me and to sign any tax agency documents necessary to effectuate these powers. **_ INSURANCE** - To purchase, pay premiums and make claims on life, health, automobile and homeowners' insurance on my behalf, except my attorney-in-fact shall not have the power to cash in or change the beneficiary of any life insurance policy. **REAL ESTATE** - To acquire, purchase, exchange, lease, grant options to sell, and sell and convey real property, or any interests therein, on such terms and conditions, including credit arrangements, as my attorney-in-fact shall deem proper; to execute, acknowledge and deliver, under seal or otherwise, any and all assignments, transfers, deeds, papers, documents or instruments which my attorney-in-fact shall deem necessary in connection therewith. **PERSONAL PROPERTY** - To acquire, purchase, exchange, lease, grant options to sell, and sell and convey personal property, or any interests therein, on such terms and conditions, including credit arrangements, as my attorney-in-fact shall deem proper; to execute, acknowledge and deliver, under seal or otherwise, any and all assignments, transfers, titles, papers, documents or instruments which my attorney-infact shall deem necessary in connection therewith; to purchase, sell or otherwise dispose of, assign, transfer and convey shares of stock, bonds, securities and other personal property now or hereafter belonging to me, whether standing in my name or otherwise, and wherever situated. POWER TO MANAGE PROPERTY- To maintain, repair, improve, invest, manage, insure, rent, lease, encumber, and in any manner deal with any real or personal property, tangible or intangible, or any interests therein, that I now own or may hereafter acquire, in my name and for my benefit, upon such terms and conditions as my attorney-in-fact shall deem proper. **GIFTS** - To make gifts, grants, or other transfers (including the forgiveness of indebtedness and the completion of any charitable pledges I may have made) without consideration, either outright or in trust to such person(s) (including my attorney-in-fact hereunder) or organizations as my attorney-in-fact shall select, including, without limitation, the following actions: (a) transfer by gift in advancement of a bequest or

obligations therefor; and to deposit or mortgage as collateral or for security for the



devise to beneficiaries under my will or in the absence of a will to my spouse and descendants in whatever degree; and (b) release of any life interest, or waiver, renunciation, disclaimer, or declination of any gift to me by will, deed, or trust
LEGAL ADVICE AND PROCEEDINGS - To obtain and pay for legal advice, to initiate or defend legal and administrative proceedings on my behalf, including actions against third parties who refuse, without cause, to honor this instrument.
SPECIAL INSTRUCTIONS: On the following lines are any special instructions limiting or extending the powers I give to my attorney-in-fact (Write "None" if no additional instructions are given):
AUTHORITY OF ATTORNEY-IN-FACT: Any party dealing with my attorney-in-fact hereunder may rely absolutely on the authority granted herein and need not look to the application of any proceeds nor the authority of my attorney-in-fact as to any action taken hereunder. In this regard, no person who may in good faith act in reliance upon the representations of my attorney-in-fact or the authority granted hereunder shall incur any liability to me or my estate as a result of such act. I hereby ratify and confirm whatever my attorney-in-fact shall lawfully do under this instrument. My attorney-in-fact is authorized as he or she deems necessary to bring an action in court so that this instrument shall be given the full power and effect that I intend on by executing it.
LIABILITY OF ATTORNEY-IN-FACT : My attorney-in-fact shall not incur any liability to me under this power except for a breach of fiduciary duty.
REIMBURSEMENT OF ATTORNEY-IN-FACT : My attorney-in-fact is entitled to reimbursement for reasonable expenses incurred in exercising powers hereunder, and to reasonable compensation for services provided as attorney-in-fact.
AMENDMENT AND REVOCATION : I can amend or revoke this power of attorney through a writing delivered to my attorney-in-fact. Any amendment or revocation is ineffective as to a third party until such third party has notice of such revocation or amendment.
STATE LAW : This Power of Attorney is governed by the laws of the State of North Dakota.
PHOTOCOPIES : Photocopies of this document can be relied upon as though they were originals.
IN WITNESS WHEREOF, I have on this day of, 20, executed this Financial Power of Attorney.



Principal's Signature	

NOTARY ACKNOWLEDGMENT

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STATE OF	
County, ss.	
through government issued photo ider	, 20, before me appeared of this Power of Attorney who proved to me ntification to be the above-named person, in myent and acknowledged that (s)he executed the
	Notary Public
	My commission expires:
	ey-in-fact named above, hereby accept ordance with the foregoing instrument.
Attorney-in	-i act's dignature
STATE OF County, ss.	
me through government issued photo	-in-Fact of this Power of Attorney who proved to identification to be the above-named person, in acceptance of appointment and acknowledged
	Notary Public
	My commission expires:

