

ALASKA GENERAL POWER OF ATTORNEY

THE POWERS GRANTED FROM THE PRINCIPAL TO THE AGENT OR AGENTS IN THE FOLLOWING DOCUMENT ARE VERY BROAD. THEY MAY INCLUDE THE POWER TO DISPOSE, SELL, CONVEY, AND ENCUMBER YOUR REAL AND PERSONAL PROPERTY. ACCORDINGLY, THE FOLLOWING DOCUMENT SHOULD ONLY BE USED AFTER CAREFUL CONSIDERATION. IF YOU HAVE ANY QUESTIONS ABOUT THIS DOCUMENT, YOU SHOULD SEEK COMPETENT ADVICE. YOU MAY REVOKE THIS POWER OF ATTORNEY AT ANY TIME.

Pursuant to AS 13.26.600, 13.26.625 - 13.26.640, and 13.26.655 - 13.26.695,

I, _____ (Name of principal), of _____ (Address of principal), do hereby appoint _____ (Name and address of agent or agents), my agent(s) to act as indicated below 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 AS 13.26.665, to the full extent that I am permitted by law to act through an agent:

MARK THE BOXES BELOW TO INDICATE THE POWERS YOU WANT TO GIVE YOUR AGENT OR AGENTS. MARK THE BOX FOR "YES" THAT IS OPPOSITE A CATEGORY BELOW TO GIVE YOUR AGENT OR AGENTS THE POWER IN THAT CATEGORY. IF YOU DO NOT MARK A BOX OPPOSITE A CATEGORY, YOUR AGENT OR AGENTS WILL NOT HAVE THE POWER IN THAT CATEGORY.

- (A) real estate transactions - Yes
- (B) transactions involving tangible personal property, chattels, and goods - Yes
- (C) bonds, shares, and commodities transactions - Yes
- (D) banking transactions - Yes
- (E) business operating transactions - Yes
- (F) insurance transactions - Yes
- (G) estate transactions - Yes
- (H) retirement plans - Yes
- (I) claims and litigation - Yes
- (J) personal relationships and affairs - Yes
- (K) benefits from government programs and civil or military service - Yes
- (L) records, reports, and statements - Yes
- (M) voter registration and absentee ballot requests - Yes
- (N) all other matters, including those specified as follows: - Yes

GRANT OF SPECIFIC AUTHORITY (OPTIONAL)

The agent or agents you have appointed WILL NOT have the power to do any of the following acts UNLESS you MARK the box opposite that category:

- Create, amend, revoke, or terminate an inter vivos trust;



- Make a gift, subject to the limitations of AS 13.26.665(q) and any special instructions in this power of attorney;
- Create or change a beneficiary designation;
- Revoke a transfer on death deed made under AS 13.48;
- Create or change rights of survivorship;
- Delegate authority granted under the 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;
- exercise authority over the content of electronic communications, as that term is defined in 18 U.S.C. 2510(12), sent or received by the principal.

IF YOU HAVE APPOINTED MORE THAN ONE AGENT, MARK ONE OF THE FOLLOWING:

- Each agent may exercise the powers conferred separately, without the consent of any other agent.
- All agents shall exercise the powers conferred jointly, with the consent of all other agents.

TO INDICATE WHEN THIS DOCUMENT SHALL BECOME EFFECTIVE, MARK ONE OF THE FOLLOWING:

- This document shall become effective upon the date of my signature.
- This document shall become effective upon the date of my incapacity and shall not otherwise be affected by my incapacity.

IF YOU HAVE INDICATED THAT THIS DOCUMENT SHALL BECOME EFFECTIVE ON THE DATE OF YOUR SIGNATURE, MARK ONE OF THE FOLLOWING:

- This document shall not be affected by my subsequent incapacity.
- This document shall be revoked by my subsequent incapacity.

IF YOU HAVE INDICATED THAT THIS DOCUMENT SHALL BECOME EFFECTIVE UPON THE DATE OF YOUR SIGNATURE AND WANT TO LIMIT THE TERM OF THIS DOCUMENT, COMPLETE THE FOLLOWING:

This document shall only continue in effect for ____ year(s) from the date of my signature.

NOTICE OF REVOCATION OF THE POWERS GRANTED IN THIS DOCUMENT

You may revoke one or more of the powers granted in this document. Unless otherwise provided in this document, you may revoke a specific power granted in this power of attorney by completing a special power of attorney that includes the specific power in this document that you want to revoke. Unless otherwise provided in this document, you may revoke all the powers granted in this power of attorney by completing a subsequent power of attorney.

NOTICE TO THIRD PARTIES

A third party who relies on the reasonable representations of an agent as to a matter relating to a power granted by a properly executed statutory form power of attorney does not incur any liability to the principal or to the principal's heirs, assigns, or estate as a result of permitting the agent to exercise the authority granted by the power of attorney. A third party who fails to honor a properly executed statutory form power of attorney may be liable to the principal, the agent, the principal's heirs, assigns, or estate for a civil penalty, plus damages, costs, and fees associated with the failure to comply with the statutory form power of attorney. If the power of attorney is one which becomes effective upon the incapacity of the principal, the incapacity of the principal is established by an affidavit, as required by law.

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

Signature of Principal _____

Acknowledged before me at _____ on _____, 20____.

Signature of Officer or Notary _____

If a person other than the principal executes the signature for the principal, the person may not be a person who is appointed an agent in the power of attorney, and the following signature line and notary verification must also be completed:

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

Signature of person signing at the request of Principal _____

Printed name of person signing _____

Form of identification of person signing _____

Acknowledged before me at _____ on _____, 20_____.

Signature of Officer or Notary _____

(1) YOU MAY DESIGNATE AN ALTERNATE AGENT. ANY ALTERNATE YOU DESIGNATE WILL BE ABLE TO EXERCISE THE SAME POWERS AS THE AGENT(S) YOU NAMED AT THE BEGINNING OF THIS DOCUMENT. IF YOU WISH TO DESIGNATE AN ALTERNATE OR ALTERNATES, COMPLETE THE FOLLOWING:

If the agent(s) named at the beginning of this document is unable or unwilling to serve or continue to serve, then I appoint the following agent to serve with the same powers:

First alternate or successor agent

(Name and address of alternate)

Second alternate or successor agent

(Name and address of alternate)

(2) YOU MAY NOMINATE A GUARDIAN OR CONSERVATOR. IF YOU WISH TO NOMINATE A GUARDIAN OR CONSERVATOR, COMPLETE THE FOLLOWING:

In the event that a court decides that it is necessary to appoint a guardian or conservator for me, I hereby nominate _____ to be considered by the court for appointment to serve as my guardian or conservator, or in any similar representative capacity.

