MASSACHUSETTS LIMITED POWER OF ATTORNEY

# I, [NAME] whose address is [ADDRESS] hereby appoint [NAME] my true and lawful agent and attorney in fact to act in my name and behalf for the following specific acts:

1. **[DETAILS]**
2. **[DETAILS]**

**This Limited Power of Attorney shall remain in full force and effect until revoked by either party in writing.**

**IN WITNESS WHEREOF, this** **[DAY] day of** **[MONTH] 20****[YEAR].**

**Witnesses: Address:**

[**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**](http://www.esign.com/)**[ADDRESS]**

[**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**](http://www.esign.com/) **[ADDRESS]**

**Pursuant to Massachusetts General Laws: Chapter 190B, Article 5.**