

**DURABLE POWER OF ATTORNEY**

I, \_\_\_\_\_ (name), of \_\_\_\_\_ (city or town), Massachusetts, appoint \_\_\_\_\_ (name of person being appointed), a resident of \_\_\_\_\_ (city or town), \_\_\_\_\_ (state), as my attorney-in-fact. I intend to create a Durable Power of Attorney.

This power shall take effect on the date I am detained by law enforcement. Proof of my detention shall be by a copy of government document showing my detention, or through attestation of an attorney on my behalf or through attestation of my attorney-in-fact.

If any attorney-in-fact appointed herein is unavailable or resigns, dies, or becomes incompetent, then I appoint the following individual as substitute attorney-in-fact, with all the same powers as given to the original attorney-in-fact: \_\_\_\_\_ (name), a resident of \_\_\_\_\_.

I give to my attorney-in-fact the following powers, to be used for my benefit in a fiduciary capacity. (*INITIAL THE POWERS GIVEN*).

\_\_\_\_ This document is intended to be a general power of attorney giving my attorney-in-fact full power to do anything I could do if present in person.

*If the above general power of attorney is not initialed, please initial below which powers are given.*

I authorize the person with my attorney-in-fact:

\_\_\_\_ A. To write checks, withdraw money from any accounts I may have with any bank or other similar institution, and to endorse and cash checks, to remove any of the contents of any such safe deposit boxes; and to close out any account or box.

\_\_\_\_ B. To transfer money or property of mine to himself or herself individually.

\_\_\_\_ C. To enter into a lease or tenancy, change the terms of or end a tenancy for me, my spouse, and/or my children.

\_\_\_\_ D. To pay bills for my spouse or children's general welfare, including medical bills, insurance, rent, telephone, and other utility bills.

\_\_\_\_ E. I also give my attorney-in-fact the authority to: \_\_\_\_\_.

I hold harmless and person or entity who suffers loss or liability from reliance on this power of attorney

WITNESS my hand and seal this \_\_\_\_\_, \_\_\_\_\_, 2017.

COMMONWEALTH OF MASSACHUSETTS

COUNTY OF \_\_\_\_\_

BEFORE ME, the undersigned Notary Public, personally appeared \_\_\_\_\_, principal, who proved to me through satisfactory evidence of identification, which was \_\_\_\_\_, to be the person whose name is signed on the preceding document, and who acknowledged before me that said individual executed the foregoing in said capacity for the purposes therein expressed.

DATED this \_\_\_\_\_, \_\_\_\_\_, 2017.

\_\_\_\_\_  
Notary Public  
My Commission Expires: