

**POWER OF ATTORNEY**  
**INFORMATION SHEET**

Grantor's Name (the individual granting the power):

\_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_  
\_\_\_\_\_ Drivers License # \_\_\_\_\_

Grantee's Name (the individual receiving the power):

\_\_\_\_\_

Address: \_\_\_\_\_ Phone#: \_\_\_\_\_  
\_\_\_\_\_

Do you allow your

Dated: \_\_\_\_\_  
\_\_\_\_\_ Grantor

Please read the information sheet carefully and check for correct spelling of names and correct dates. Any wrong information or changes due to misspellings or changes by you will require a \$15.00 charge. You must notify us within 30 days if there are any errors or omissions. After 30 days there will be a charge for changes.