Form A205 GENERAL POWER OF ATTORNEY

(With Durable Provision)

TO ALL PERSONS, be it known, that I, of 2029 Shagbark Rd Birmingham, A Grantor, do hereby make and grant a general power of a of 2029 Shagbark Rd. Birmingham, A and do thereupon constitute and appoint said individua	attomey to Barbara Jebelian Al.
could do personally, with full power of substitution and right to sell, deed, buy, trade, lease, mortgage, assign personal property; the right to execute, accept, underta- to deposit, endorse, or withdraw funds to or from any right to borrow, lend, invest or reinvest funds on any t- actions on my behalf; the right to vote (in person or b	d authority to do and undertake all acts on my behalf that d revocation, including but not limited by said authority the n, rent or dispose of any of my present or future real of the and perform any and all contracts in my name; the right of my bank accounts, depositories or safe deposit box; the terms; the right to initiate, defend, commence or settle legacy proxy) any shares or beneficial interest in any entity, and wisor deemed necessary to protect my interests generally of
My attorney-in-fact hereby accepts this appoins said fiduciary capacity consistent with my best interest and ratify all acts so undertaken.	intment subject to its terms and agrees to act and perform in ts as he in his best discretion deems advisable, and I affirm
Special durable provisions:	
revoked by the Grantor giving notice of revocation good faith upon this power of attorney shall be pro-	by disability of the Grantor. This power of attorney may be to the attorney-in-fact, provided that any party relying instead unless and until said party has either a) actual og of said revocation in the public records where the Granto
Other terms: None	Inst # 1995-01568
Signed under seal this 19IR day of Signed in the presence of:	SHELBY COUNTY JUDGE OF PROBATE SHELBY COUNTY JUDGE OF PROBATE 8.50 1995
Witness)	Grantor
	Bar Sura In lean
Witness	Attorney-in-Fact
Note: Delete powers that do not apply	
State of County of	
is/are subscribed to the within instrument and ack	of satisfactory evidence) to be the person(s) whose name(s nowledged to me that he/she/they executed the same i her/their signature(s) on the instrument the person(s), or the ited the instrument.
Signature	- AffiantKnownProduced II
2029 Thay Sack Rd Burning Ram Hl 35244	Type of ID(Seal

© E-Z Legal Forms. Before you use this form, read it, fill in all blanks, and make whatever changes are necessary to your particular transaction. Consult a lawyer if you doubt the form's fitness for your purpose and use. E-Z Legal Forms and the retailer make no representation or warranty, express or implied, with respect to the merchantability of this form for an intended use or purpose.