

## POWER OF ATTORNEY Statutory Short Form

Notice: The powers granted by this document are broad and sweeping. They are defined in Connecticut Statutory Short Form Powers of Attorney Act, Sections 1-42 through 1-56, inclusive, of the Connecticut General Statutes, which expressly permits the use of any other or different form of power of attorney desired by the parties concerned. The grantor of any power of attorney or the attorney-in-fact may make application to a court of probate for an accounting as provided in subsection (b) of Section 45a-175 C.G.S.

KNOW ALL MEN BY THESE PRESENTS, which are intended to constitute a

General Power of Attorney pursuant to Connecticut Statutory Short Form Power of

Attorney Act:

That I, JOSE VARGAS of Chappaqua, New York, do hereby appoint my attorney, JASON

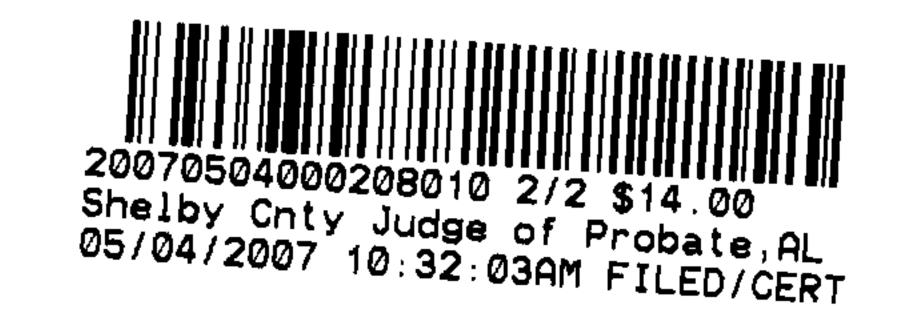
L. MCCOY of Vernon, Connecticut, my attorney-in-fact TO ACT

First: 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 the Connecticut Statutory Short Form Power of Attorney Act to the extent that I am permitted by law to act through an agent:

(Strike out and initial in the opposite box any one or more of the subdivisions as to which the principal does not desire to give the agent authority. Such elimination of any one or more of subdivisions (A) to (L), inclusive, shall automatically constitute an elimination also of subdivision (M).) To strike out any subdivision the principal must draw a line through the text of that subdivision AND write his initials in the box opposite.

(A) real estate transactions;	( )
(B) chattel and goods transactions;	( )
(C) bond, share and commodity transactions;	(2X)
(D) banking transactions;	(2V) (2V)
(E) business operating transactions;	( )
(F) insurance transactions;	( )
(G) estate transactions;	( )
(H) claims and litigation;	(g) L)
(I) personal relationships and affairs;	(7) X)
(J) benefits from military service;	(J2)
(K) records, reports and statements;	(-x & y)
	{ <i>f</i>

Mike Atchison



(L) health care decisions:

(M)all other matters;

This power of attorney shall not be affected by the subsequent disability or incompetence of the principal.

Second: with full and unqualified authority to delegate any or all of the foregoing powers to any person or persons whom my attorney(s)-in-fact shall select;

Third: hereby ratifying and confirming all that said attorney(s) or substitute(s) does or causes to be done.

IN WITNESS WHEREOF, I have hereunto set my name and affixed my seal this 27 day of February, 2006.

Signed, Sealed and Delivered in the presence of:

PUBLIC OF CONNECTION OF THE OF

CONNECTICUT

administration

**SS**:

(City)

COUNTY OF TOLLAND

On this 27 day of February, 2006, before me, the undersigned officer, personally appeared, JOSE VARGS, Signer of the foregoing instrument, and acknowledged the same to be his free act and deed, before me.

**Notary Public** 

JØSE VARGAS

My Commission Expires: 10 31 2007 (SEAL)