

# CAROL S. HUBBARD ALABAMA POWER OF ATTORNEY

This power of attorney authorizes another person (your agent) to make decisions concerning your property for you (the principal). Your agent will be able to make decisions and act with respect to your property (including your money) whether or not you are able to act for yourself. The meaning of authority over subjects listed on this form is explained in the Alabama Uniform Power of Attorney Act, Chapter 1A, Title 26, Code of Alabama 1975.

This power of attorney does not authorize the agent to make health care decisions for you. Such powers are governed by other applicable law.

You should select someone you trust to serve as your agent. Unless you specify otherwise, generally the agent's authority will continue until you die or revoke the power of attorney or the agent resigns or is unable to act for you.

Your agent is entitled to reimbursement of reasonable expenses and reasonable compensation unless you state otherwise in the Special Instructions.

This form provides for designation of one agent. If you wish to name more than one agent, you may name a co-agent in the Special Instructions. Co-agents are not required to act together unless you include that requirement in the Special Instructions.

If your agent is unable or unwilling to act for you, your power of attorney will end unless you have named a successor agent. You may also name a second successor agent.

This power of attorney becomes effective immediately unless you state otherwise in the Special Instructions.

If you have questions about the power of attorney or the authority you are granting to your agent, you should seek legal advice before signing this form.

#### **DESIGNATION OF AGENT**

I, CAROL S. HUBBARD, Principal, name the following person as my agent:

Name: ARTHUR RODNEY HUBBARD

Address: 1327 Whirlaway Circle, Helena, AL 35080

Telephone Number:

## **GRANT OF GENERAL AUTHORITY**

I grant my agent and any successor agent general authority to act for me with respect to the following subjects as defined in the Alabama Uniform Power of Attorney Act, Chapter 1A, Title 26, Code of Alabama 1975:

If you wish to grant general authority over all of the subjects enumerated in this section you may SIGN here:

Principal, Carol S. Hubbard

#### OR

If you wish to grant specific authority over less than all subjects enumerated in this section you must INITIAL by each subject you want to include in the agent's authority:

Real Property as defined in Section 26-1A-204

Tangible Personal Property as defined in Section 26-1A-205

Tangible Personal Property as defined in Section 26-1A-205

Stocks and Bonds as defined in Section 26-1A-206

Commodities and Options as defined in Section 26-1A-207

Banks and Other Financial Institutions as defined in Section 26-1A-208

Operation of Entity or Business as defined in Section 26-1A-209

Insurance and Annuities as defined in Section 26-1A-210

Estates, Trusts, and Other Beneficial Interests as defined in Section 26-1A-211

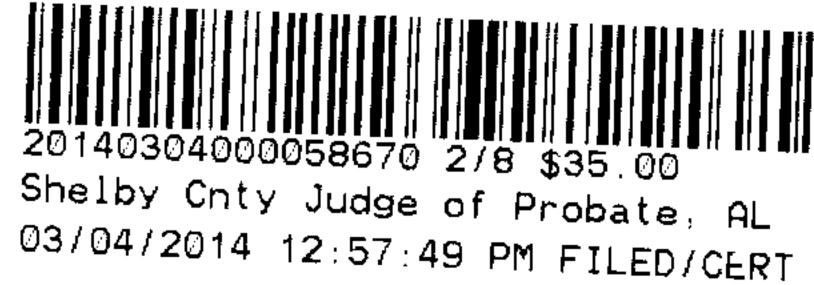
Claims and Litigation as defined in Section 26-1A-212

Personal and Family Maintenance as defined in Section 26-1A-213

Benefits from Governmental Programs or Civil or Military Service as defined in Section 26-1A-214

Retirement Plans as defined in Section 26-1A-215

Taxes as defined in Section 26-1A-217



# **GRANT OF SPECIFIC AUTHORITY (OPTIONAL)**

My agent MAY NOT do any of the following specific acts for me UNLESS I have INITIALED the specific authority listed below:

(CAUTION: Granting any of the following will give your agent the authority to

take actions that could significantly reduce your property or change how your

property is distributed at your death. INITIAL the specific authority you WANT to

Create, amend revoke, or terminate an inter vivos trust, by trust or applicable law

Make a gift to which exceeds the monetary limitations of Section 26-1A-217 of the Alabama Uniform Power of Attorney Act, but subject to any special instructions in this power of attorney

Create or change rights of survivorship

Create or change a beneficiary designation

Authorize another person to exercise the authority granted under this power of attorney

Waive the principal's right to be a beneficiary of a joint and survivor annuity, including a survivor benefit under a retirement plan

Exercise fiduciary powers that the principal has authority to delegate

#### LIMITATIONS ON AGENT'S AUTHORITY

An agent that is not my ancestor, spouse, or any descendant MAY NOT use my property to benefit the agent or a person to whom the agent owes an obligation of support unless I have included that authority in the Special Instructions.

Limitation of Power. Except for any special instructions given herein to the agent to make gifts, the following shall apply:

(a) Any power or authority granted to my Agent herein shall be limited so as to prevent this Power of Attorney from causing any Agent to be taxed on my income or from causing my assets to be subject to a "general power of appointment" by my Agent as defined in 26 U.S.C. §2041 and 26 U.S.C. §2514 of the Internal Revenue Code of 1986, as amended.

My Agent shall have no power or authority whatsoever with respect to any policy of insurance owned by me on the life of my Agent, or any trust created by my Agent as to which I am a trustee.

# SPECIAL INSTRUCTIONS (OPTIONAL)

You may give special instructions on the following lines. For your protection, if there are no special instructions write NONE in this section.

#### EFFECTIVE DATE

This power of attorney is effective immediately unless I have stated otherwise in the Special Instructions.

# NOMINATION OF [CONSERVATOR OR GUARDIAN] (OPTIONAL)

If it becomes necessary for a court to appoint a [conservator] of my estate or [quardian] of my person, I nominate the following person(s) for appointment:

Name of Nominee for [conservator] of my estate:

Nominee's Address:

Nominee's Telephone Number:

Name of Nominee for [guardian] of my person:

Nominee's Address:

Nominee's Telephone Number:

## RELIANCE ON THIS POWER OF ATTORNEY

Any person, including my agent, may rely upon the validity of this power of attorney or a copy of it unless that person knows it has terminated or is invalid.

SIGNATURE AND ACKNOWLEDGEMENT Roll & Hulfard

(Signature of Principal)

Signature Date: February 28, 2014

Name Printed: Carol S. Hubbard

Address: 268 Victoria Station, Maylene, AL 35114

Telephone Number:



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State of Alabama	)
County of Shelby	j

I, Lora Beth Roberts, a Notary Public, in and for the County or state, hereby certify that **Carol S. Hubbard**, whose name is signed to the foregoing document, and who is known to me, acknowledged before me on this day that, being informed of the contents of the document, she executed the same voluntarily on the day the same bears date.

Given under my hand this 28<sup>th</sup> day of February, 2014.

1 2 1 2 0 1 7

My Commission Expires

Notary Public

### IMPORTANT INFORMATION FOR AGENT

Agent's Duties

When you accept the authority granted under this power of attorney, a special legal relationship is created between you and the principal. This relationship imposes upon you legal duties that continue until you resign or the power of attorney is terminated or revoked. You must:

- (1) do what you know the principal reasonably expects you to do with the principal's property or, if you do not know the principal's expectations, act in the principal's best interest;
- (2) act in good faith;
- (3) do nothing beyond the authority granted in this power of attorney; and
- (4) disclose your identity as an agent whenever you act for the principal by writing or printing the name of the principal and signing your own name as "agent" in the following manner:

(Principal's Name) by (Your Signature) as Agent

Unless the Special Instructions in this power of attorney state otherwise, you must also:

- (1) act loyally for the principal's benefit;
- (2) avoid conflicts that would impair your ability to act in the principal's best interest;
- (3) act with care, competence, and diligence;
- (4) keep a record of all receipts, disbursements, and transactions made on behalf of the principal;
- (5) cooperate with any person that has authority to make health care decisions for the principal to do what you know the principal reasonably expects or, if you do not know the principal's expectations, to act in the principal's best interest; and

20140304000058670 5/8 \$35.00 Shelby Cnty Judge of Probate, AL 03/04/2014 12:57:49 PM FILED/CERT (6) attempt to preserve the principal's estate plan if you know the plan and preserving the plan is consistent with the principal's best interest.

# Termination of Agent's Authority

You must stop acting on behalf of the principal if you learn of any event that terminates this power of attorney or your authority under this power of attorney. Events that terminate a power of attorney or your authority to act under a power of attorney include:

- (1) death of the principal;
- (2) the principal's revocation of the power of attorney or your authority
- (3) the occurrence of a termination event stated in the power of attorney;
- (4) the purpose of the power of attorney is fully accomplished; or
- (5) if you are married to the principal, a legal action is filed with a court to end your marriage, or for your legal separation, unless the Special Instructions in this power of attorney state that such an action will not terminate your authority.

# Liability of Agent

The meaning of the authority granted to you is defined in the Alabama Uniform Power of Attorney Act, Chapter 1A, Title 26, Code of Alabama 1975. If you violate the Alabama Uniform Power of Attorney Act, Chapter 1A, Title 26, Code of Alabama 1975, or act outside the authority granted, you may be liable for any damages caused by your violation.

If there is anything about this document or your duties that you do not understand, you should seek legal advice. (Act 2011-683, §1.)

Arthur Rodney Hubbard, Agent

1327 Whirlaway Circle

Helena. AL 35080

# AGENTS CERTIFICATION AS TO THE VALIDITY OF POWER OF ATTORNEY AND AGENTS AUTHORITY

STATE OF ALABAMA

COUNTY OF SHELBY

I, Arthur Roa'ney Hubbard, certify under penalty of perjury that Carol S. Hubbard granted me authority as an agent or successor agent in power of attorney dated February 28, 2014.

I further (certify) that to my knowledge:

- (1) the Principal is alive and has not revoked the Power of Attorney or my authority to act under the Power of Attorney and the Power of Attorney and my authority to act under the Power of Attorney have not terminated;
- (2) if the Power of Attorney was drafted to become effective upon the happening of an event or contingency, the event or contingency has occurred;
- (3) if I was named as a successor agent, the prior agent is no longer able or willing to serve; and

(4)		

SIGNATURE AND ACKNOWLEDGMENT

Arthur Rodney Hubbard, Agent

1327 Whirlaway Circle Helena, AL 35080

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# STATE OF ALABAMA

# COUNTY OF SHELBY

I, Lora Beth Roberts, a Notary Public, in and for the County or state, hereby certify that *Arthur Rodney Hubbard*, whose name is signed to the foregoing document, and who is known to me, acknowledged before me on this day that, being informed of the contents of the document, he executed the same voluntarily on the day the same bears date.

Given under my hand this the 28<sup>th</sup> day of February, 2014

Signature of Notary

My commission expires:

THIS DOCUMENT PREPARED BY:

Stone, Patton, Kierce & Freeman 118 18th Street North Bessemer, AL 35020 (205) 424-1150

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