

**ALABAMA POWER OF ATTORNEY FORM  
IMPORTANT INFORMATION**

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 your agent, you should seek legal advise before signing this form.

**DESIGNATION OF AGENT**

I, **Cynthia Ryan McComiskey**, name the following persons as my agents:

**Timothy J. Ryan**  
**5309 Cedar Drive**  
**Birmingham, AL 35242**

**DESIGNATION OF SUCCESSOR AGENT(S) (OPTIONAL)**

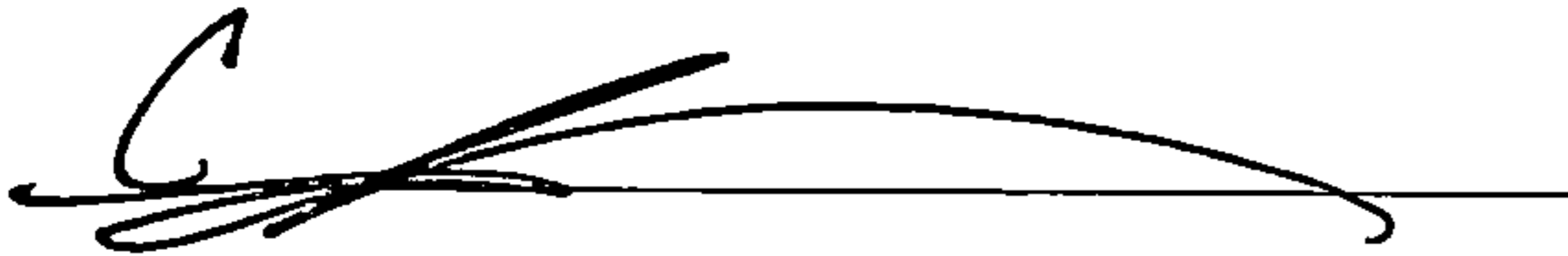
If my agents are unable or unwilling to act for me, I name as my successor agent:

**Teresa Ryan Curi**  
**2026 Silvertop Lane**  
**Long Beach, IN 46360**

**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:



**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 give your agent:

- 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 the 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 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.



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Shelby Cnty Judge of Probate, AL  
09/18/2020 03:12:43 PM FILED/CERT

*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.S. \_\_ 2041 and 26 U.S.C.S. \_\_ 2514 of the Internal Revenue Code of 1986, as amended.

(b) 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 the section.

NONE

If this power of attorney is to take effect only upon my disability, incompetency or incapacity, initial here: \_\_\_\_\_

If this power of attorney confers the authority to make decisions regarding provision, withholding, or withdrawal of life-sustaining treatment and artificially provided nutrition and hydration, initial here: \_\_\_\_\_

### 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 or guardian] of my estate or [guardian] of my person, I nominate the following person(s) for appointment:

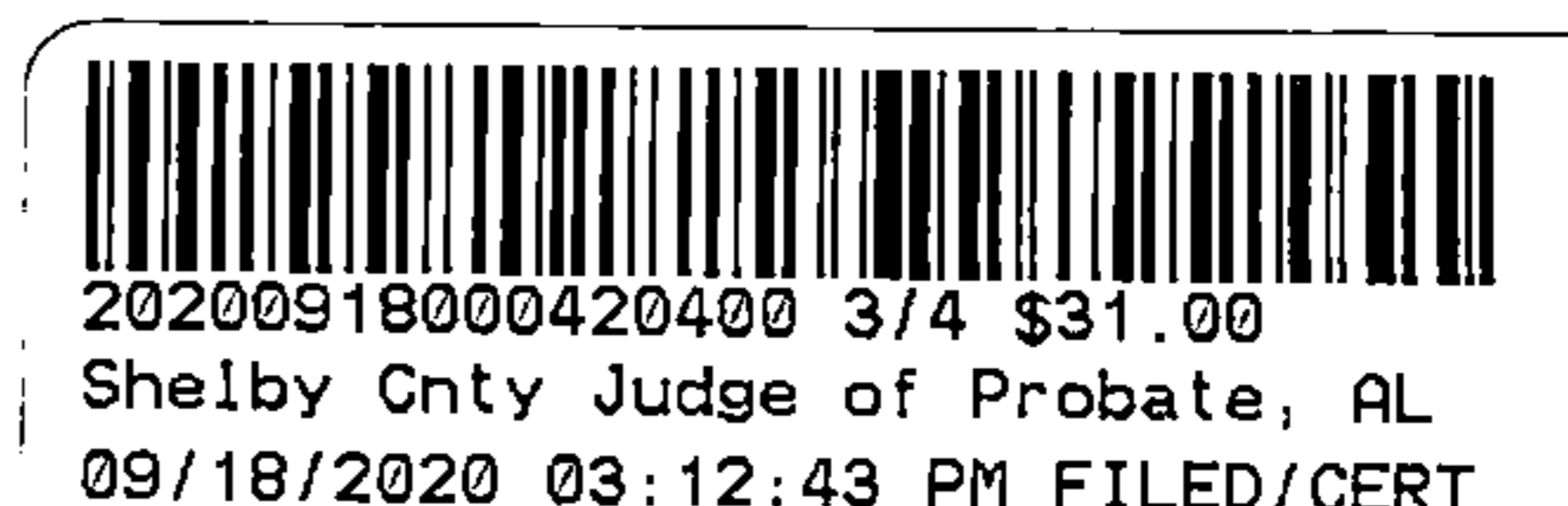
Name of Nominee for [conservator or guardian] of my estate: TIMOTHY J. RYAN  
Nominee's Address: 5309 CEDAR CIRCLE, BIRMINGHAM, AL 35242

Nominee's Telephone Number: \_\_\_\_\_

Name of Nominee for [guardian] of my person: TIMOTHY J. RYAN

Nominee's Address: 5309 CEDAR CIRCLE, BIHAM, AL 35242


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 that it has been terminated or is invalid.

**SIGNATURE AND ACKNOWLEDGMENT**

  
\_\_\_\_\_  
**Cynthia Ryan McComiskey**  
Your Signature Date: Sept. 3, 2020  
**Cynthia Ryan McComiskey**  
**3271 Darrel Circle**  
**Birmingham, AL 35244**

State of Alabama  
County of Shelby

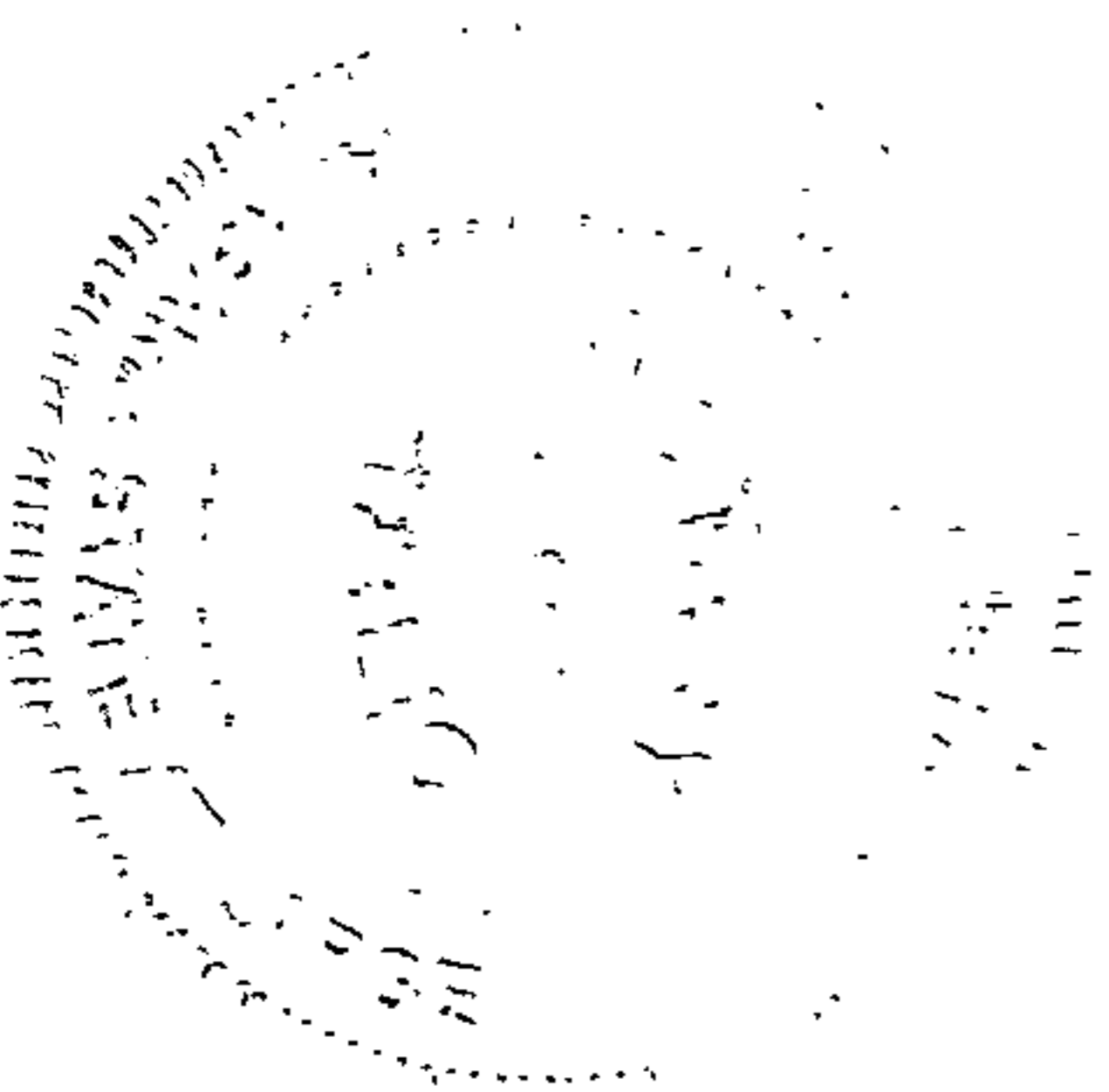
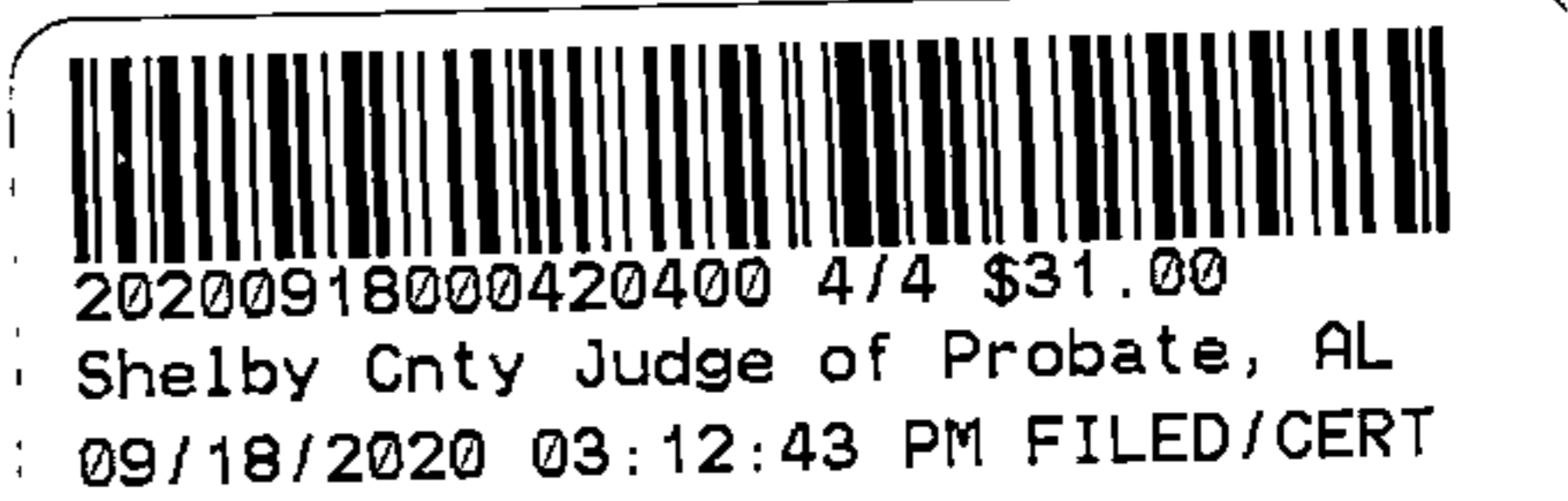
I, Victoria Harkness, a Notary Public, in and for the County in this State, hereby certify that **Cynthia Ryan McComiskey**, whose name is signed to the foregoing document, and who is known to me, acknowledged before me on this day that, being informed of the contents of the document, she executed same voluntarily on the day the same bears date.

Given under my hand this the 3rd day of Sept., 2020.

Victoria Harkness (Seal, if any)  
Signature of Notary

My commission expires: \_\_\_\_\_

Victoria K. Harkness  
Notary Public, Alabama State At Large  
My Commission Expires April 21, 2023



This Instrument Prepared By:

**Jim Pino & Associates, P.C.**  
**363 Canyon Park Drive**  
**Pelham, Alabama 35124**  
**Telephone: 205-663-1581**  
**Facsimile: 205-663-1424**