STATE OF ALABAMA)

JEFFERSON COUNTY)

JOANNA FOSTER
DURABLE POWER OF ATTORNEY

This power of attorney authorizes **JULIE F. SUTTON** to make decisions concerning your property for you (**JOANNA FOSTER**). 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 IA, 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.

Your 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 ir 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 Special Instuctions.

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

DESIGNATION OF AGENT

I, **JOANNA FOSTER**

name the following person as my agent:

Name of Agent: **JULIE F. SUTTON**

Agent's Address: 430 O"Neal Drive, Hoover, AL 35226

Agent's Telephone Number: 205-427-3472

DESIGNATION OF SUCCESSOR AGENT

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

Name of Successor Agent: **None**

Successor Agent's Address:_____

Successor Agent's Telephone Number:_____

GRANT OF GENERAL AUTHORITY

I grant each of my agents 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 IA, Title 26, Code ofAlabama 1975:

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

Joanna Foster

JOANNA FOSTER

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

_____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-216

_____Gifts 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 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 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 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 powerof 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.

(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) **NONE**

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

If it becomes necessary for a court to appoint a conservator and 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:

JULIE F. SUTTON

Nominee's Address: 430 O'Neal Drive,Hoover, AL 35226

Nominee's Telephone Number: 205-427-3472

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 ACKNOWLEDGMENT

Joanna Foster

Your Name Printed: Joanna Foster

Date: July 15, 2013

Your Address: 276 High Ridge Drive, Pelham, AL 35124

Your Telephone Number: 205-620-9459

State of Alabama

County of Jefferson

I, W. L. Longshore, III, a Notary Public, in and for the County in this State, hereby certify that Joanna Foster, 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 or she executed the same voluntarily on the day the same bears date.

Given under my hand this the 15th day of July, 2013.

Signature of Notary _____

My commission expires: 5-18-16

This document prepared by:
W. L. Longshore, III
Longhsore, Buck & Longshore, P.C.
2009 2nd Avenue North,
Birmingham Alabama 35203
Phone: 205-252-7661

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

(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) deathof 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, CodeofAlabama 1975. If you violate the Alabama Uniform Power-of-Attorney Act, Chapter 1A, Title 26, Code ofAlabama 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.

SECTION 26-A1-302. AGENT'S CERTIFICATION. A document substantially in the following format may be used by an agent to certify facts concerning a Power-of-Attorney.

AGENT'S CERTIFICATION AS TO THE VALIDITY OF POWER-OF-ATTORNEY AND AGENT'S AUTHORITY

State of ALABAMA

County of JEFFERSON

I, **JULIE F. SUTTON**, certify under penalty of perjury that **Joanna Foster** granted me authority as an agent or successor agent in a Power-of-Attorney dated July 15 _____, 2013.

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;

SIGNATURE AND ACKNOWLEDGMENT

Julie F. Sutton DATE: 7/15/2013

JULIE F. SUTTON

Agent's Name Printed:

430 O'Neal Drive, Hoover, AL 35226
Agent's Address:

205-427-3472
Agent's Telephone Number:

This document was acknowledged before me on

7/15/2013 ,(Date)

by JULIE F. SUTTON (Seal, if any)

Signature of Notary Jennifer Brasher

My commission expires: 12/9/23

JENNIFER BRASHER
MY COMMISSION EXPIRES
DECEMBER 9, 2023
NOTARY PUBLIC
STATE OF ALABAMA

This document prepared by:
THIS INSTRUMENT PREPARED BY:
W. L. Longshore, III
Longshore Buck & Longshore, P.C.
2009 Second Avenue North
Birmingham, Alabama 35203-3703
Phone: 205-252-7661

Filed and Recorded
Official Public Records
Judge of Probate, Shelby County Alabama, County Clerk
Shelby County, AL
05/18/2023 09:32:47 AM
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