

POWER OF ATTORNEY

DELEGATION OF PARENTAL POWERS

I, _____ nominate, constitute, and appoint _____ of _____, Arizona, my true and lawful attorney in fact, for me and in my name, place, and stead and for my use and benefit, to do any act in connection with the care, custody, control, or property of my minor child,(ren) _____, Date(s) of Birth, _____ in accordance with the provision of Arizona Revised Statues 14-5104, which states as follows:

A parent or guardian of a minor or incapacitated person, by a properly executed power of attorney, may delegate to another person, for a period not exceeding six months, any powers he may have regarding care, custody or property of the minor child or ward, except power to consent to marriage or adoption of the minor.

This Power of Attorney shall remain in full force and effect for a period of six (6) months from the date of execution unless sooner terminated by me.

I certify that I am the natural parent of

IN WITNESS OF THIS, I set my hands, this _____ day of _____, 20_____

Signature

STATE OF ARIZONA)
)ss
COUNTY OF MARICOPA)

SUBSCRIBED AND SWORN before me this _____ day of _____, 20_____.

Notary

My Commission Expires: