**POWER OF ATTORNEY QUESTIONNAIRE**

The purpose of the power of attorney is to give broad and sweeping powers to another person called your “attorney-in-fact”. Your attorney-in-fact is able to manage your affairs on your behalf. Any action taken by your attorney-in-fact pursuant to the powers you designate in your power of attorney form is considered binding, as though you took the action yourself. Your spouse does not automatically have the general power to act on your behalf if you become incapacitated or incompetent without a power of attorney. Having a power of attorney avoids having a court appoint a conservator to make financial decisions for you.

**PERSONAL INFORMATION**

Name: Click here to enter your full legal name.

Date of Birth: Click here to enter your D.O.B.

US Citizen? [ ]  Yes [ ]  No

Street Address: Click here to enter your street address.

County: Click here to enter the county you live in.

Telephone Number: Click here to enter your telephone number

Email: Click here to enter your email address.

**MARITAL STATUS:**

[ ]  Married

[ ]  Divorced

[ ]  Widowed

[ ]  Never Married

**SPOUSE OR SIGNIFICANT OTHER**

Name: Click here to enter your spouse’s full legal name.

Date of Birth: Click here to enter your spouse’s D.O.B.

US Citizen? [ ]  Yes [ ]  No

Street Address: Click here to enter your spouse’s street address.

County: Click here to enter the county your spouse lives in.

Telephone Number: Click here to enter your spouse’s telephone number.

Email: Click here to enter your spouse’s email.

**SELECTION OF ATTORNEY-IN-FACT**

Please identify the person who will serve as your attorney-in-fact. You can name both a primary and a successor attorney-in-fact. A successor attorney-in-fact will serve if your primary attorney-in-fact is unable or unwilling.

**Primary Attorney-In-Fact**

[ ]  My spouse.

Another person:

Name: Click here to enter your agent’s name.

Relationship to you: Click here to enter your agent’s relationship to you.

Address: Click here to enter your agent’s full street address.

Telephone Number: Click here to enter your agent’s telephone number.

**Successor Attorney-In-Fact**

Name: Click here to enter your agent’s name.

Relationship to you: Click here to enter your agent’s relationship to you.

Address: Click here to enter your agent’s full street address.

Telephone Number: Click here to enter your agent’s telephone number.

**POWERS GIVEN**

Please select which powers you would like to authorize your agent to conduct on your behalf (you may select “all of the above” under “N” below:

[ ]  (A) Real Property Transactions

[ ]  (B) Tangible Personal Property Transactions

[ ]  (C) Bond, Share, and Commodity Transactions

[ ]  (D) Banking Transactions

[ ]  (E) Business Operating Transactions

[ ]  (F) Insurance Transactions

[ ]  (G) Beneficiary Transactions

[ ]  (H) Gift Transactions

[ ]  (I) Fiduciary Transactions

[ ]  (J) Claims and Litigation

[ ]  (K) Family Maintenance

[ ]  (L) Benefits from Military Service

[ ]  (M) Records, Reports, and Statements

[ ]  (N) All of the Above

**EFFECTIVENESS UPON INCAPACITATION OR INCOMPETENCE**

Please select one of the following options:

[ ]  This power of attorney shall *remain effective* if I become incapacitated or incompetent.

[ ]  This power of attorney shall *become ineffective* if I become incapacitated or incompetent.

**GIFTS TO ATTORNEY-IN-FACT**

Please select one of the following options:

[ ]  I DO NOT authorize my attorney-in-fact to make gifts to themselves or to anyone the attorney-in-fact has a legal obligation to support.

[ ]  I authorize Click here to enter name of agent allowed to make gifts, as my attorney-in-fact, to make gifts to themselves or to anyone the attorney-in-fact has a legal obligation to support.

**ATTORNEY-IN-FACT ACCOUNTING**

Please select one of the following options:

[ ]  My attorney-in-fact need not render an accounting unless I request it or the accounting is otherwise required by Minnesota Statute, section 523.21.

[ ]  My attorney-in-fact must render Choose an item. accountings to me or Click here to enter the Name and Address of the person your attorney-in-fact is required to render accountings to during my lifetime, and a final accounting to the personal representative of my estate, if any is appointed, after my death.