Power of Attorney Template

This Limited Power of Attorney is given on this ___________ day of ___________ , 20____ by
___________________________________________________________,
(principal (address, city & state, country)

I appoint the following person:______________________________________________, (name of
attorney, agency)
of:_________________________ (address of attorney or agency)
_____________________________________________ (city and state)
to be my true and lawful attorney and give and grant said attorney full power and authority to do
and perform on may behalf all and every act and thing necessary for the specific and limited purpose
only of obtaining support/maintenance for
____________________________________. WITNESSED BY:

________________________ ______________________ ______________________
(Signature of Witness 1) (Signature of Witness 2) (principal’s signature)
________________________ ______________________
(Print name of Witness 1) (Print name of Witness 2)
________________________ __________________________________
(Address of Witness 1) (Address of Witness 2)

CERTIFICATION/VERIFICATION REQUIREMENTS:

- Countries Other than the U.S.: This document must be executed in accordance with local law.
- For Use by US Tribunals/Agencies Only: This Power of Attorney must be notarized.

The foregoing instrument was acknowledged by me this ____ day of ____________,
20____ by:______________________________,
who is/are personally known by me or who has/have produced:
_____________________________ as identification and who did not take an oath.

________________________ ________________
County, State Notary Public Commission Expires