

Legal Power of Attorney Authorization

Subject: Power of Attorney Authorization for Banking Matters

To Whom It May Concern,

This letter serves as formal notification that I, [Your Full Name], have executed a Power of Attorney document granting [Attorney-in-Fact Name] full authority to conduct banking transactions on my behalf.

Due to my declining health condition, I require assistance managing my financial affairs. The attached Power of Attorney document, duly notarized and witnessed, grants my attorney-in-fact comprehensive authority over all my accounts at your institution.

The authorized powers include but are not limited to: opening and closing accounts, making deposits and withdrawals, writing checks, applying for loans, accessing safe deposit boxes, and making investment decisions. This authorization shall remain in effect until formally revoked by me in writing.

Please update your records to reflect this arrangement and provide [Attorney-in-Fact Name] with all necessary banking access. I have included copies of the Power of Attorney document, my identification, and the attorney-in-fact's identification for your files.

Should you require any clarification or additional documentation, please contact my attorney at [Attorney Contact] or reach me directly at [Phone Number] during my available hours.

I trust this arrangement will facilitate smooth management of my banking affairs.

Sincerely,

[Your Signature]

[Your Printed Name]

[Date]

Witnessed by: [Witness Signature and Name]

Notarized: [Notary Signature and Seal]

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