

LIMITED DURABLE POWER OF ATTORNEY

Pursuant to Missouri Revised Statutes 404.700-404.735 and 404.800-404.865, I appoint the following person as my attorney-in-fact:

This is a durable power of attorney, and the authority of my attorney-in-fact shall not terminate if I become disabled or in the event of later uncertainty regarding whether I am alive or dead. This durable power of attorney shall become effective immediately. My attorney-in-fact shall not be obligated to furnish bond or other security as a condition to this instrument. No compensation shall be paid for services as attorney-in-fact, but reasonable expenses accrued therewith shall be compensated.

1) **Limited Grant of Authority.** The attorney-in-fact shall have the following powers, including all powers that are necessary and proper to execute the powers set forth below.

a) **Property.** To maintain, repair, improve, manage, insure, rent, lease, sell, convey, mortgage, or otherwise dispose of, deal with, or encumber the real property located at «=property_address_inline» and more fully described as «=property_description» (the "Property").

b) **Transact Business.** To transact any and all lawful business of any kind on my behalf, related to any mortgage, deed of trust, or other loan that is secured by an lien or other interest in the Property.

- c) **Mortgage**. To obtain information regarding the loan related to the mortgage or deed of trust for the Property from any lender or mortgage servicer. This grant of authority shall include but not be limited to the ability to obtain payoffs or payment information, to make payments on my behalf, to discuss the loan with the Servicer or any subsequent servicer or holder of the mortgage or deed of trust for this property.
- 2) **Powers Prohibited**. The attorney-in-fact shall not have authority to take any action that is not related to the Property or any loans secured by the Property.
- 3) **Accounting Waived**. I waive the necessity of my attorney-in-fact to provide an accounting to me or any other person during my lifetime or upon my death.
- 4) **Disability or Incapacity Defined**. Disability or incapacity means the person's ability to receive and evaluate information effectively or communicate decisions is impaired to the extent that the person lacks the capacity to manage personal financial resources or exercise a reasonable level of care with regard to the duties of an attorney-in-fact, as determined by the certification of one licensed physician, and shall apply if the person cannot take any effective actions due to involuntary detention or disappearance, as determined by affidavit of one party with such knowledge.
- 5) **Attorney-Client Privilege**. I hereby authorize my attorney to provide my attorney-in-fact with any information that is necessary for my attorney-in-fact to adequately exercise the authority granted herein. I waive any attorney-client privilege for this limited purpose.

6) **Execution and Construction.** This instrument is executed pursuant to the Kansas Power of Attorney Act and amendments thereto, and any questions surrounding this document shall be addressed pursuant to those statutes. Any question concerning the power or authority of my attorney-in-fact shall be construed in favor of the attorney-in-fact having such power or authority.

Printed Name:

Date:

Title (if company):

STATE OF
COUNTY OF

On this _____ day of _____, 20____, before me, _____
_____ (notary name), a Notary Public in and for said state,
personally appeared _____ (name of signer) as
_____ (title, if applicable) for _____
_____ (entity name, if applicable), known to me to be the person
who executed the foregoing marital status affidavit and acknowledged to me that he/she
executed the same for the purposes therein stated.

Notary Signature

Printed Name:

Commission Expires:

