GENERAL POWER OF ATTORNEY

	I,(1), of(2), hereby appoint
(3)	, of(4), as my attorney in fact to act in my capacity
	every act that I may legally do through an attorney in fact. This power shall be in full force
and e	effect on the date below written and shall remain in full force and effect until(5)
	or unless specifically extended or rescinded earlier by either party.
	Dated(6),(7)
	(8)
	(8)
	STATE OF(9)
	COUNTY OF(10)
(10)	BEFORE ME, the undersigned authority, on this _(11)_ day of(12), 19
(13)	personally appeared (14) to me well known to be the person

(13)_, personally appeared _____(14)_____to me well known to be the person described in and who signed the Foregoing, and acknowledged to me that he executed the same freely and voluntarily for the uses and purposes therein expressed.

WITNESS my hand and official seal the date aforesaid.

_____(15)_____ NOTARY PUBLIC

My Commission Expires:__(16)___

NOTICE

The information in this document is designed to provide an outline that you can follow when formulating business or personal plans. Due to the variances of many local, city, county and state laws, we recommend that you seek professional legal counseling <u>before entering into any contract or agreement.</u>