



LIMITED POWER OF ATTORNEY

UNITED STATES OF AMERICA

BY: _____
Name of Principal

STATE OF LOUISIANA

TO: _____
Name of Agent

PARISH OF _____

BE IT KNOWN, THAT ON THIS _____ day of _____, 20____
BEFORE ME, _____, a Notary Public, duly commissioned
and qualified in and for the Parish of _____, State of Louisiana, and in the
presence of the witnesses hereinafter named and undersigned:

PERSONALLY CAME AND APPEARED _____, a
Name of Principal
person of the full age of majority, whose mailing address is _____,
Street or P. O. Box of Principal
_____, State of Louisiana, and whose Social Security Number is
City and Zip of Principal
_____, hereinafter referred to as "Principal," who declared that Principal
SSN of Principal

has made and appointed, and by these presents Principal does make, name, nominate, ordain,
authorize, constitute and appoint in Principal's stead, _____, a
Name of Agent
person of the full age of majority, whose mailing address is _____,
Street of P.O. Box of Agent
_____, State of Louisiana, and whose Social Security Number is
City and Zip of Agent
_____, hereinafter referred to as "Agent," to be Principal's true and
SSN of Agent

lawful Agent and attorney-in-fact, giving, and by these presents granting unto the Agent, full
power and authority for Principal and in Principal's name and behalf to wit:

To receive the retirement check payable in the name of Principal from the Louisiana State
Employees Retirement System (LASERS) and deposit said check into the Principal's bank
account or negotiate said check to pay the bills, and handle the affairs of the Principal herein, and
the Principal does give, grant and convey unto his or her Agent, full and complete authority to do
as the Agent may in his or her sole and uncontrolled discretion deems necessary and proper, to
sign any and all documents, changes of address forms, receipts or instruments that the Agent may
deem necessary and proper in connection with the handling of the receipt of the Retirement Check
and payment of the Principal's bills and finally, to do and perform every act in connection with the
proposed transaction substantially as hereinabove set forth, to the same extent and in the

same manner as the Principal could do if personally present with Principal hereby ratifying, approving and confirming each and every act done by the Agent.

THUS DONE AND PASSED before me, Notary, and the undersigned competent witnesses _____ and _____ on the _____ day of _____, 20____, at _____, _____

WITNESSES:

Signature of Witness

PRINCIPAL

Signature of Witness

NOTARY PUBLIC ID No:



ACCEPTANCE

BEFORE ME, the undersigned Notary, personally came and appeared

_____ who stated that he or she does hereby accept the Limited
Name of Agent

Power of Attorney granted to him or her by _____ on the _____,
Name of Principal

day of _____, _____.

THUS DONE AND PASSED before me, Notary, and the undersigned competent witnesses _____ and _____ on the _____ day of _____, 20____, at _____, _____

WITNESSES:

Signature of Witness

AGENT Tax ID#:

Signature of Witness

NOTARY PUBLIC ID No: