

INSTRUCTION SHEET FOR ENDURING POWER OF ATTORNEY

Please print off, complete and return this document to us by email or post and we will contact you with a quote and to discuss further.

1. DONOR (Person granting Power of Attorney)

Name:

Address:

Occupation: Date of Birth

Telephone No: (H) (W)

Mobile No. . . .

Email Address:

2. ATTORNEY (Person exercising Power of Attorney)

Name:

Address:

Occupation: Date of Birth

Telephone No: (H) (W)

Mobile No:

Email Address:

3. ATTORNEY (Person exercising Power of Attorney) (if you require more than one attorney)

Name:

Address:

Occupation: Date of Birth

Telephone No: (H) (W)

Mobile No:

Email Address:

4. If the above attorneys are unable or unwilling to act would you like someone else to take their place (e.g. initially appoint your wife as your attorney but if she is unable to unwilling to act then your son.)

SUBSTITUTE ATTORNEY

Name:

Address:

Occupation: Date of Birth

Telephone No: (H) (W)

Mobile No:

Email Address:

5. Is the power to include personal/health decisions?
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6. ACTS OF ATTORNEYS

If more than one Attorney - do they have to all sign or can any one sign (to transact your affairs)?

All sign-jointly
(unanimous
decision)

Any one sign-
severally (anyone
may decide)

7. RESTRICTION ON YOUR POWER OF ATTORNEY

This section need not be completed if you wish to give your Attorney unlimited power to deal with your property. However, it is possible to restrict your Attorney's actions to specified pieces of property or actions on specified bank accounts or dealings with certain shares. If this is the case, please provide details below (for example, my Attorney is only permitted to sell my house situated a 2 Bigg Street, Mansfield).

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8. CONFLICT OF INTEREST

This is an authorisation for your attorney to enter into a transaction on your behalf even if his/her interests and duty in relation to the transaction conflict (i.e. if the husband and wife own property jointly, the wife is incapacitated and the husband needs to sell her share in the property to pay for medical expenses but wants to purchase her share - he has a conflict of interest) - inclusion of this clause authorises him to proceed even if there is a conflict.

Yes

No

9. FINANCIAL ADVISORS NOTES TO SOLICITOR

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If you would like to seek clarification on a particular issue or wish to seek any advice before completing this Instruction sheet please contact **Noel Duffy** direct on:

Business: 07 5502 3102

Mobile: 0422 994 151

E-mail: nduffy@duffylaw.com.au

Website: www.duffylaw.com.au