

selected and retained with reasonable care, and to dismiss any such persons at any time, with or without cause.

9. To authorize any and all kinds of medical procedures and treatment including, but not limited to, medication, therapy, surgical procedures, and dental care, and to consent to all such treatment, medication, or procedures where such consent is required; to obtain the use of medical equipment, devices, or other equipment and devices deemed by Attorney needful for proper care, custody, and control of my person and to do so without liability for any neglect, omission, misconduct, or fault with respect to such medical treatment or other matters authorized herein;

10. To apply for, elect, receive, deposit, and utilize on my behalf all benefits payable by any governmental body or agency, state, federal, county, city, or other and to obtain, make claim upon, collect, and dispose of insurance and insurance proceeds for my care, custody, and control.

11. To deposit in my name and for my account, with any bank, banker, or trust company or any building or savings and loan association or any other banking or similar institution, all monies to which I am entitled or which may come into Attorney's hands as such attorney in fact, and all bills of exchange, drafts, checks, promissory notes, and other securities for money payable belonging to me, and for that purpose to sign my name and endorse each and every such instrument for deposit or collection; and from time to time, or at any time, to withdraw any or all monies deposited to my credit in any bank, banker, or trust company or any building or savings and loan association or any other banking or similar institution having monies belonging to me, and, in connection therewith, to draw checks or to make withdrawals in my name; to make, do, execute, and acknowledge, and deliver,

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