

This Document can be made available
in alternative formats upon request

State of Minnesota
HOUSE OF REPRESENTATIVES

EIGHTY-FIFTH
SESSION

HOUSE FILE No. **3741**

March 3, 2008

Authored by Dettmer, Severson, Haws, Koenen and Simpson

The bill was read for the first time and referred to the Committee on Public Safety and Civil Justice

1.1 A bill for an act
1.2 relating to power of attorney; changing certain requirements and the statutory
1.3 short form; amending Minnesota Statutes 2006, section 523.23, subdivision 1.

1.4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

1.5 Section 1. Minnesota Statutes 2006, section 523.23, subdivision 1, is amended to read:

1.6 Subdivision 1. **Form.** The following form may be used to create a power of attorney,
1.7 and, when used, it must be construed in accordance with sections 523.23 and 523.24:

1.8 STATUTORY SHORT FORM POWER OF ATTORNEY
1.9 MINNESOTA STATUTES, SECTION 523.23

1.10 IMPORTANT NOTICE: The powers granted by this document are broad and
1.11 sweeping. They are defined in Minnesota Statutes, section 523.24. If you have any
1.12 questions about these powers, obtain competent advice. This power of attorney may be
1.13 revoked by you if you wish to do so. This power of attorney is automatically terminated
1.14 if it is to your spouse and proceedings are commenced for dissolution, legal separation,
1.15 or annulment of your marriage. This power of attorney authorizes, but does not require,
1.16 the attorney-in-fact to act for you.

1.17 PRINCIPAL (Name and Address of Person Granting the Power)

1.18
1.19
1.20

1.21
1.22 ATTORNEY(S)-IN-FACT
1.23 (Name and Address)

SUCCESSOR
ATTORNEY(S)-IN-FACT
(Optional) To act if any named
attorney-in-fact dies, resigns, or is
otherwise unable to serve.
(Name and Address)

2.1 First Successor

2.2

2.3

2.4 Second Successor

2.5

2.6

2.7 NOTICE: If more than one

2.8 attorney-in-fact is designated, make a

2.9 check or "x" on the line in front of one

2.10 of the following statements:

2.11 ... Each attorney-in-fact	EXPIRATION DATE (Optional)
2.12 may independently exercise ,
2.13	Use Specific
2.14 the powers granted.	Month Day Year Only
2.15 ... All attorneys-in-fact	
2.16 must jointly exercise the	
2.17 powers granted.	

2.18 I, (the above-named Principal) hereby appoint the above named Attorney(s)-in-Fact to act

2.19 as my attorney(s)-in-fact:

2.20 FIRST: To act for me in any way that I could act with respect to the following

2.21 matters, as each of them is defined in Minnesota Statutes, section 523.24:

2.22 (To grant to the attorney-in-fact any of the following powers, make a check or "x" on

2.23 the line in front of each power being granted. You may, but need not, cross out each power

2.24 not granted. Failure to make a check or "x" on the line in front of the power will have the

2.25 effect of deleting the power unless the line in front of the power of (N) is checked or x-ed.)

2.26(A) real property transactions;

2.27 I choose to limit this power to real property in County,

2.28 Minnesota, described as follows:

2.29 (Use legal description. Do not use street address.)

2.30

2.31

2.32

2.33

2.34 (If more space is needed, continue on the back or on an attachment.)

- 2.35(B) tangible personal property transactions;
- 2.36(C) bond, share, and commodity transactions;
- 2.37(D) banking transactions;
- 2.38(E) business operating transactions;
- 2.39(F) insurance transactions;
- 2.40(G) beneficiary transactions;
- 2.41(H) gift transactions;

- 3.1 (I) fiduciary transactions;
- 3.2 (J) claims and litigation;
- 3.3 (K) family maintenance;
- 3.4 (L) benefits from military service;
- 3.5 (M) records, reports, and statements;
- 3.6 (N) all of the powers listed in (A) through (M) above and all other matters.

3.7 SECOND: (You must indicate below whether or not this power of attorney will be
 3.8 effective if you become incapacitated or incompetent. Make a check or "x" on the line in
 3.9 front of the statement that expresses your intent.)

3.10 This power of attorney shall ~~continue to~~ not be effective if I become incapacitated
 3.11 or incompetent.

3.12 This power of attorney shall not ~~continue to~~ be effective if I become incapacitated
 3.13 or incompetent.

3.14 THIRD: (You must indicate below whether or not this power of attorney authorizes
 3.15 the attorney-in-fact to transfer your property to the attorney-in-fact. Make a check or "x"
 3.16 on the line in front of the statement that expresses your intent.)

3.17 This power of attorney ~~authorizes~~ does not authorize the attorney-in-fact to
 3.18 transfer my property to the attorney-in-fact.

3.19 This power of attorney ~~does not authorize~~ authorizes the attorney-in-fact to
 3.20 transfer my property to the attorney-in-fact.

3.21 FOURTH: (You ~~may~~ must indicate below whether or not the attorney-in-fact is
 3.22 required to make an accounting. Make a check or "x" on the line in front of the statement
 3.23 that expresses your intent.) If you do not indicate your intent, a quarterly accounting
 3.24 to you will be required.

3.25 My attorney-in-fact need not render an accounting unless I request it or the
 3.26 accounting is otherwise required by Minnesota Statutes, section 523.21.

3.27 My attorney-in-fact must render
 3.28 (Monthly, Quarterly, Annual)

3.29 accountings to me or
 3.30 (Name and Address)

3.31 during my lifetime, and a final accounting to the personal representative of my
 3.32 estate, if any is appointed, after my death. My attorney-in-fact need not render
 3.33 an accounting unless I request it or the accounting is otherwise required by
 3.34 Minnesota Statutes, section 523.21.

3.35 In Witness Whereof I have hereunto signed my name this day of,

3.36
 3.37 (Signature of Principal)

4.1 (Acknowledgment of Principal)

4.2 STATE OF MINNESOTA)

4.3) ss.

4.4 COUNTY OF)

4.5 The foregoing instrument was acknowledged before me this day of,,

4.6 by

4.7 (Insert Name of Principal)

4.8

4.9 (Signature of Notary Public or
4.10 other Official)

4.11 ACKNOWLEDGMENT OF
4.12 ATTORNEY(S)-IN-FACT

4.13 I, (insert name(s) of attorney(s)-in-fact), acknowledge that by exercising
4.14 a power granted by this document, I assume certain duties under law and may be civilly
4.15 or criminally liable for an action made in bad faith or in a fraudulent or negligent manner,
4.16 as provided in Minnesota Statutes, section 523.21 or 523.22, or other applicable law.

4.17 In Witness Whereof I have hereunto signed my name this day of,

4.18 _____

4.19 _____

4.20 Signature of Attorney(s)-in-Fact

4.21 (Acknowledgment of Attorney(s)-in-Fact)

4.22 STATE OF MINNESOTA)

4.23) ss.

4.24 COUNTY OF)

4.25 The foregoing instrument was acknowledged before me this day of,,

4.26 by _____

4.27 (Insert Name(s) of Attorney(s)-in-fact)

4.28 _____

4.29 Signature of Notary Public or other Official

4.30 Specimen Signature of
4.31 This instrument was drafted by: Attorney(s)-in-Fact

4.32 (Notarization not required)

4.33

4.34

4.35

4.36