## Client Questionnaire POA



## **POWER OF ATTORNEY**

**CLIENT'S NAME** 

**CLIENT'S ADDRESS** 

**CLIENT'S PHONE NUMBER** 

**CLIENT'S EMAIL ADDRESS** 

Who is giving the power of attorney (Donor)

Who is going to be the attorney (Donee)

What is the relation between the Donor and Donee (e.g. spouses)

What is the purpose of the power of attorney (e.g. traveling)

List restrictions on the use of the power of attorney (for example, operate bank account, refinance the property or none

Does the Donee has the authority to distribute funds payable to the Donor?

How long is the power of attorney valid? (6months, 1 year, or indefinitely?)

Can we reach the donor to verify instructions?

Please provide email and other contact information when the Donor is away.