## **POWER OF ATTORNEY**

PLEASE FILL OUT THE ATTACHED POWER OF ATTORNEY AS PER THE INSTRUCTIONS BELOW. WE WOULD APPRECIATE IF ALL THE ITMES ARE TYPED IN SO YOUR RECORD IS MORE LEGIBLE FOR RECORDKEEPING PURPOSES. THE DIRECTIONS ARE LETTERED AS YOU SEE THEM STARTING AT THE TOP OF THE PAGE.

- A. PLEASE PLACE AN "X" IN THE APPROPRIATE BOX REFLECTING THE TYPE OF BUSINESS YOU HAVE.
- B. PLEASE TYPE IN THE FULL TAX ID, OR EIN NUMBER FOR YOUR BUSINESS OR SOCIAL SECURITY NUMBER IF YOU ARE AN INDIVIDUAL.
- C. PLEASE TYPE IN THE FULL NAME OF YOUR COMPANY AS ASSOCIATED WITH THE TAX ID/EIN NUMBER OR IF THIS IS PERSONAL FFECTS YOU MUST TYPE IN YOU FULL NAME AS ASSOCIATED WITH YOUR SOCIAL SECURITY NUMBER.
- D. PLEASE TYPE IN THE CORROSPONDING BUSINESS (OR INDIVIDUAL) TYPE AS MARKED IN STEP A.
- E. PLEASE TYPE IN THE STATE IN WHICH THE COMPANY YOU HAVE PRESENTED THE TAX ID/EIN NUMBER FOR IS REGISTERED. DO NOT FILL IN IF PERSONAL EFFECTS.

- F. PLEASE TYPE THE FULL ADDRESS FOR WHICH THE BUSINESS IS REGISTERED AT. FOR PERSONAL EFFECTS IT MUST BE YOUR PLACE OF RESIDENCE.
- G. PLEASE TYPE IN THE COMPANY NAME AS IN STEP C
- H. PLEASE TYPE IN THE FULL NAME OF THE PERSON THAT IS FILLING OUT THIS FORM AND THEY MUST SIGN THEIR NAME NEXT TO IT. (MUST BE THE OWNER OF THE GOODS, PRESIDENT, OR OFFICER OF THE COMPANY.)
- I. PLEASE TYPE THE PERSONS TITLE (PRESIDENT, OWNER, OFFICER)
- J. PLEASE TYPE IN TODAY'S DATE
- K. PLEASE HAVE SOMEONE WHO CAN ATTEST TO THE INFORMATION FILLED IN BEING CORRECT AND HAVE THEM TYPE AND SIGN THEIR NAME