

STATE OF MINNESOTA

JUDICIAL DISTRICT

COUNTY OF _____

DISTRICT COURT

POWER OF ATTORNEY IN FACT

Name of Entity

STATE OF MINNESOTA)
) SS
COUNTY OF _____)

I, _____, _____, of
Name Title of Authorized Position Held

Name of Entity

Corporation, Partnership, Sole Proprietorship, Association (**circle one**) duly authorized to do business in the State of Minnesota hereby appoint and authorize:

Name or Names of Employees

as attorney in fact for the business, to commence, prosecute, defend, satisfy or settle any claim or cause of action brought by or against said business in the court of _____ County, State of Minnesota, and to execute on behalf of the business any and all documents and pleadings necessary to accomplish said purpose.

I declare under penalty of perjury that everything I have stated in this document is true and correct. Minn. Stat. § 358.116.

Date: _____

Signature

Title