



Explanation of TCDRS Durable Power of Attorney

The durable power of attorney on the reverse side includes language acceptable to the Texas County & District Retirement System (TCDRS). Please note the following requirements:

The authority granted under this power of attorney form is limited and relates only to an interest the member/annuitant has in the retirement and optional death benefit programs administered by TCDRS.

The authority granted under this power of attorney form may be exercised by the attorney-in-fact on behalf of the member/annuitant notwithstanding later disability or incompetence of the member/annuitant. Because this power of attorney is not automatically terminated by disability, it is called a durable power of attorney.

To be effective this durable power of attorney must be signed by the principal and witnessed by a notary public.

This power of attorney form is forwarded as an example of a durable power of attorney that would be accepted by TCDRS. The member/annuitant should talk with an attorney with respect to this document's acceptability for other purposes.

You may submit an original or a certified copy of the power of attorney. A photocopy is also acceptable provided it is legible and shows all required seals and signatures. Any original or certified copies will be returned to you upon your request.

The member/annuitant may appoint a successor attorney in fact who is authorized to exercise these powers should the named agent die, become legally disabled, resign or refuse to act.

Should the member/annuitant wish to revoke a power of attorney on file with TCDRS, a true and correct copy of a written revocation signed by the principal must be filed with TCDRS.

Information provided to TCDRS is maintained for administration of your benefits. If you have questions about your information, or believe that information provided to TCDRS may be incorrect, please call TCDRS Member Services.

The durable power of attorney must be filed with TCDRS to be valid.

The acceptance of appointment can be filed with TCDRS separately from the durable power of attorney.

A durable power of attorney filed with TCDRS is valid without a completed acceptance of appointment.



Durable Power of Attorney

NOTICE: THE POWERS GRANTED BY THIS DOCUMENT ARE BROAD AND SWEEPING. THEY ARE EXPLAINED IN THE DURABLE POWERS OF ATTORNEY ACT, SUBTITLE P, TITLE 2, ESTATES CODE. IF YOU HAVE ANY QUESTIONS ABOUT THESE POWERS, OBTAIN COMPETENT LEGAL ADVICE. THIS DOCUMENT DOES NOT AUTHORIZE ANYONE TO MAKE MEDICAL AND OTHER HEALTH-CARE DECISIONS FOR YOU. YOU MAY REVOKE THIS POWER OF ATTORNEY IF YOU LATER WISH TO DO SO.

I, _____, Principle,
(insert your name and address)
appoint _____, _____,
(insert the name and address of the person appointed) (relationship)

as my agent (attorney in fact) to act for me in any lawful way with respect to any interest I have in the retirement and any optional death benefit programs administered by the Texas County & District Retirement System (TCDRS), including, but not limited to, filing applications, making benefit elections, designating beneficiaries, endorsing checks, receiving funds and exercising any power with respect to retirement transactions as that power is construed under Section 752.113 of the Estates Code. I further give and grant unto my said attorney in fact full power and authority to do and perform every act necessary and proper to be done in the exercise of any of the foregoing powers as fully as I might or could do if personally present, hereby ratifying and confirming all that my said attorney in fact shall lawfully do or cause to be done by virtue hereof.

I hereby bind myself to indemnify and hold harmless any third party for any and all loss or damage, including liability, which said third party may at any time sustain or incur in connection with having accepted and acted under this Power of Attorney.

This Power of Attorney shall not terminate on my disability. This Power of Attorney is effective upon the date of signature before a Notary Public. Revocation of this Power of Attorney is not effective as to any third party, including, but not limited to, TCDRS, until the third party receives actual notice of the revocation.

If my agent dies, becomes legally disabled, resigns or refuses to act, I name the following as successor to that agent:

Successor Attorney-In- Fact

Address of Successor Attorney-In- Fact

Principal's Signature

Effective Date of Power of Attorney

Social Security Number

STATE OF TEXAS COUNTY OF _____

This Power of Attorney was subscribed, sworn to, and acknowledged before me on _____ day of

_____, _____ by _____
Month Year Principal's Name

Notary Public in and for the State of Texas

(SEAL)

Printed Name of Notary

Notary Commission Expires



Acceptance of Appointment

I, _____(print name), have read the foregoing Power of Attorney and am the person identified therein as Agent (attorney-in-fact) for _____(name of grantor of power of attorney) _____(SSN of grantor of power of attorney), the Principal named therein.

I hereby acknowledge the following:

- I owe a duty of loyalty and good faith to the Principal, and must use the powers granted to me only for the benefit of the Principal.
- I must keep the Principal's funds and other assets separate and apart from my funds and other assets and titled in the name of the Principal. I must not transfer title to any of the Principal's funds or other assets into my name alone. My name must not be added to the title of any funds or other assets of the Principal, unless I am specifically designated as Agent for the Principal in the title.
- I must protect, conserve and exercise prudence and caution in my dealings with the Principal's funds and other assets.
- I must keep a full and accurate record of my acts, receipts and disbursements on behalf of the Principal. I understand my duty to inform and account for my actions in the manner described on the reverse side of this acceptance.
- I acknowledge my authority to act on behalf of the Principal ceases at the death of the Principal.
- I agree that I will notify TCDRS of the death of the Principal immediately.

I hereby accept the foregoing appointment as Agent for the Principal with full knowledge of the responsibilities imposed on me, and I will faithfully carry out my duties to the best of my ability. By accepting or acting under the appointment, I assume the fiduciary and other legal responsibilities of an agent.

_____ Date _____ Signature

_____ Relationship _____ Home Phone # _____ Mobile Phone #

_____ Mailing Address

Correspondence should be sent to: Attorney-in-fact's address Principal's address



Durable Power of Attorney Act

Subchapter C, Duty to Inform and Account

751.101 The attorney in fact or agent is a fiduciary and has a duty to inform and to account for actions taken pursuant to the power of attorney.

751.102 The attorney in fact or agent shall timely inform the principal of all actions taken pursuant to the power of attorney.

Failure of the attorney in fact or agent to inform timely, as to third parties, shall not invalidate any action of the attorney in fact or agent.

751.103 The attorney in fact or agent shall maintain records of each action taken or decision made by the attorney in fact or agent.

751.104 (a) The principal may demand an accounting by the attorney in fact or agent. Unless otherwise directed by the principal, the accounting shall include:

- (1) the property belonging to the principal that has come to the attorney in fact's or agent's knowledge or into the attorney in fact's or agent's possession;
- (2) all actions taken or decisions made by the attorney in fact or agent;
- (3) a complete account of receipts, disbursements, and other actions of the attorney in fact or agent, including their source and nature, with receipts of principal and income shown separately;
- (4) a listing of all property over which the attorney in fact or agent has exercised control, with an adequate description of each asset and its current value if known to the attorney in fact or agent;
- (5) the cash balance on hand and the name and location of the depository where the balance is kept;
- (6) all known liabilities; and
- (7) such other information and facts known to the attorney in fact or agent as may be necessary to a full and definite understanding of the exact condition of the property belonging to the principal.

(b) Unless directed otherwise by the principal, the attorney in fact or agent shall also provide to the principal all documentation regarding the principal's property.

(c) The attorney in fact or agent shall maintain all records until delivered to the principal, released by the principal, or discharged by a court.



Certification of Durable Power of Attorney by Agent

I, _____ (agent), certify under penalty of perjury that:

1. I am the agent named in the power of attorney validly executed by _____ (“principal”) on _____ (date), and the power of attorney is now in full force and effect.
2. The principal is not deceased and is presently domiciled in _____ (city and state/territory or foreign country).
3. To the best of my knowledge after diligent search and inquiry:
 - a. The power of attorney has not been revoked by the principal or suspended or terminated by the occurrence of any event, whether or not referenced in the power of attorney;
 - b. At the time the power of attorney was executed, the principal was mentally competent to transact legal matters and was not acting under the undue influence of any other person;
 - c. A permanent guardian of the estate of the principal has not qualified to serve in that capacity;
 - d. My powers under the power of attorney have not been suspended by a court in a temporary guardianship or other proceeding;
 - e. If I am (or was) the principal’s spouse, my marriage to the principal has not been dissolved by court decree of divorce or annulment or declared void by a court, or the power of attorney provides specifically that my appointment as the agent for the principal does not terminate if my marriage to the principal has been dissolved by court decree of divorce or annulment or declared void by a court;
 - f. No proceeding has been commenced for a temporary or permanent guardianship of the person or estate, or both, of the principal; and
 - g. The exercise of my authority is not prohibited by another agreement or instrument.
4. If under its terms the power of attorney becomes effective on the disability or incapacity of the principal or at a future time or on the occurrence of a contingency, the principal now has a disability or is incapacitated or the specified future time or contingency has occurred.
5. I am acting within the scope of my authority under the power of attorney, and my authority has not been altered or terminated.
6. If applicable, I am the successor to _____ (predecessor agent), who has resigned, died, or become incapacitated, is not qualified to serve or has declined to serve as agent, or is otherwise unable to act. There are no unsatisfied conditions remaining under the power of attorney that preclude my acting as successor agent.
7. I agree not to:
 - a. Exercise any powers granted by the power of attorney if I attain knowledge that the power of attorney has been revoked, suspended, or terminated; or
 - b. Exercise any specific powers that have been revoked, suspended, or terminated.

Forms must be completed in ink and any corrections or whiteouts must be initialed.



Certification of Durable Power of Attorney by Agent

8. A true and correct copy of the power of attorney is attached to this document.

Date: _____, 20____.

(Printed Name of Agent)

(Signature of Agent)

Sworn to and subscribed before me by _____ (Name of Agent) on
_____ (Date), to certify, which witness my hand and seal of office.

(Signature of Notary Public)

(Print, Type, or Stamp Commissioned Name of Notary Public)

_____ County, State of _____

NOTICE TO PERSONS SIGNING THIS AFFIDAVIT

Section 841.101 of the Texas Government Code provides for punishment by fine and/or imprisonment of (i) a person who knowingly makes a false statement in a report of application to TCDRS in an attempt to defraud the system or (ii) a person who knowingly makes a false certificate of an official report to the system.

Forms must be completed in ink and any corrections or whiteouts must be initialed.