

## **SPECIAL POWER OF ATTORNEY**

THIS IS A MILITARY POWER OF ATTORNEY PREPARED PURSUANT TO TITLE 10, UNITED STATES CODE, SECTION 1044b AND EXECUTED BY A PERSON AUTHORIZED TO RECEIVE LEGAL ASSISTANCE FROM THE MILITARY SERVICES. FEDERAL LAW EXEMPTS THIS POWER OF ATTORNEY FROM ANY REQUIREMENT OF FORM, SUBSTANCE, FORMALITY OR RECORDING THAT IS PRESCRIBED FOR POWERS OF ATTORNEY UNDER THE LAWS OF A STATE, THE DISTRICT OF COLUMBIA, OR A TERRITORY, COMMONWEALTH, OR POSSESSION OF THE UNITED STATES. FEDERAL LAW SPECIFIES THAT THIS POWER OF ATTORNEY SHALL BE GIVEN THE SAME LEGAL EFFECT AS A POWER OF ATTORNEY PREPARED AND EXECUTED IN ACCORDANCE WITH THE LAWS OF THE JURISDICTION WHERE IT IS PRESENTED.

KNOW ALL MEN BY THESE PRESENTS: That I, \_\_\_\_\_,  
currently residing at \_\_\_\_\_,

**DO MAKE, CONSTITUTE, AND APPOINT:** \_\_\_\_\_,  
who currently resides at \_\_\_\_\_,

as my true and lawful attorney-in-fact, to act as follows, **GIVING AND GRANTING** unto my said attorney full power to:

**To change, establish, start or stop, increase or decrease any allotment from my military pay for the payment of rent to Atlantic Marine Corps Communities, Lincoln Military Housing, or any other property management firm or landlord and to take any and all actions that may be necessary, convenient, or proper for such purpose.**

**I further specifically authorize my attorney-in-fact to sign any residential lease on my behalf and to make, endorse, accept, receive, sign, seal, execute, acknowledge, and deliver agreements, certificates, receipts and such other instruments in writing as may be necessary, convenient, or proper with regard to acceptance of military family rental property, including, but not limited to rental housing pursuant to any joint public/private venture between the United States, the Department of Defense, the Marine Corps, or any subunit thereof and any private, commercial property management firm or landlord.**

**FURTHER**, I do authorize my aforesaid attorney-in-fact to perform all necessary acts in the execution of the aforesaid authorizations with the same validity as I myself could effect if personally present. Any act or thing lawfully done hereunder by my said attorney shall be binding on myself and my heirs, legal and personal representatives and assigns.

**PROVIDED**, however, that all business transacted hereunder for me or for my account shall be transacted in my name, and that all endorsements and instruments executed by my said attorney for the purpose of carrying out the foregoing powers shall contain my name, followed by that of my said attorney and the designation "ATTORNEY-IN-FACT." Notwithstanding my inclusion of a specific expiration date herein, if on the below specified expiration date, or if at any time immediately preceding that specified expiration date, I should be, or have been, carried in a military status of

"missing," "missing in action," or "prisoner of war," then this Power of Attorney shall automatically continue to remain valid and in full effect until 90 days after I have returned to the United States military control following termination of such status **UNLESS OTHERWISE REVOKED OR TERMINATED BY ME.**

This Power of Attorney and shall not be affected by my subsequent incapacity or mental incompetence. I hereby waive any requirement that my attorney-in-fact file any inventories or accounts as a result of this appointment.

**FURTHER**, unless sooner revoked or terminated by me, this Special Power of Attorney shall become NULL and VOID from and after the \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

**IN WITNESS WHEREOF**, I have hereunto set my hand and seal this the \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_(SEAL)

**ACKNOWLEDGEMENT**

On this \_\_\_\_day of \_\_\_\_\_ 20\_\_, before me, the undersigned officer, personally appeared \_\_\_\_\_, known to me (or was satisfactorily proven) to be accompanying or serving in or with the armed forces of the United States (or to be the spouse of a person accompanying or serving in or with the armed forces of the United States) and to be the person whose name is subscribed to the within instrument, and acknowledged that he / she executed the same for the purposes therein contained. And I do further certify that I am an officer of the Armed Forces of the United States serving in the rank indicated below, and that in that in accordance with North Carolina General Statute 47-2 I am authorized to exercise the powers of a notary for the acknowledgement of this document without the requirement of a seal, and that this document is executed by me in accordance with those powers and in that capacity.

\_\_\_\_\_  
Signature of Officer

Authority: NC Gen Stat 47-2  
**NO SEAL REQUIRED**

\_\_\_\_\_  
Rank, Branch of Service

\_\_\_\_\_  
Command

\_\_\_\_\_  
Printed Name of Officer