

Power of Attorney Form

The Power of Attorney Form can be used by you to name an agent, and this person will be able to make retirement-related decisions for you.

Because the form contains a <i>durability clause</i> , the <i>agent</i> will be able to make decisions for you even if yo become incapacitated and are unable to make financial-related decisions for yourself.
The following checklist may be helpful as you submit this form:
☐ I am of sound mind and acting in my own free will.
My agent is an adult that I trust to act in my best interest.
☐ I talked to the person that I named as my <i>agent</i> .
☐ I know that the <i>Power of Attorney Form</i> is limited to RRS matters.
☐ I understand that even though I am of sound mind, my <i>agent</i> can make retirement-related decisions for me.
☐ I know that I can revoke my current <i>Power of Attorney Form</i> by submitting a new <i>Power of Attorney Form</i> .
☐ I also know that I can revoke my current form by sending a signed and notarized request to the RRS.
☐ I have kept a copy of this form for my personal financial records.



Durable Power of Attorney Form

(Designation of Agent for RRS Matters)

DIRECTIONS

Please complete this form to name an agent. This person will be able to receive information and make retirement-related decisions. These powers, however, are expressly limited to plans administered by the Richmond Retirement System (RRS).

By completing this form, you will revoke all other durable power of attorney forms on file with the RRS.

PART A. MEMBER INFORMATION	
Name SSN Phone Email	Address
PART B. DESIGNATION OF AGENT I of	name the following person as my agent:
Agent Name Agent Phone Agent Email CHECK 1:	Address
CHECK 1.	

PART C. GRANT OF GENERAL AUTHORITY

I hereby appoint the agent identified on page 1 of 2 the general authority to act for me with respect to plans administered by the Richmond Retirement System as provided in the <u>Virginia Uniform Power of Attorney Act, Chapter 16, Title 64.2-1636</u>. This includes the following:

- 1. Select the form and timing of payments under a RRS plan and withdraw benefits from a plan, unless specific authorization is required in **Part D** of this form;
- 2. Make a rollover, including a direct trustee-to-trustee rollover, of benefits from one retirement plan to another;
- 3. Establish a RRS plan in my name;
- 4. Make contributions to a RRS plan;
- 5. Exercise investment powers available under a RRS plan; and
- 6. Borrow from, sell assets to, or purchase assets from a RRS plan.

Accordingly, the Richmond Retirement System may share account-specific information with the agent.

PART D. GRANT OF SPECIFIC AUTHORITY

I hereby appoint the agent identified on page 1 of 2 the specific	grant of authority to act for	me with respect to plan	s administered by
the Richmond Retirement System as provided in the Virginia	Uniform Power of Attorney	y Act, Chapter 16, Title	e 64.2-1622. This
includes the following, if initialed:		-	
A C			

initial, if applicable	A. Create or change rights	s of survivorship;			
initial, if applicable	B. Create or change a ben	eficiary designation;			
initial, if applicable	C. Delegate authority gran	nted under the power of attorney.			
initial, if applicable	of attorney to create in	ouse, ancestor, or descendant of mine, but I grant them the specific authority under this power in any individual, including themselves or an individual to whom they owe a legal obligation rest in my property, including by right of survivorship and/or beneficiary designation, if A and/nitialed by myself.			
PART E.	RELIANCE ON POV	VER OF ATTORNEY			
Any person, terminated or		ely on the validity of this power of attorney or a cop	by of it unless that person knows it has		
PART F. S	SIGNATURES				
	Principal Signature	Printed Name of Principal	Date		
and acknowl	-	e by the principal whose name is signed above; the principal whose name is signed above.			
	Notary Signature	Printed Name of Notary	Date		
	County	(Place seal in space below.) City /			
	State	_			
C	Commission Expiration Date	_			
	Registration No.	_			