

DAVENPORT'S LOUISIANA WILLS AND ESTATE PLANNING LEGAL FORMS

**1st Edition : 2018
Published by Davenport Press**

**Written by:
Alexander W. Russell**

COPYRIGHT © 2018 BY ALEX RUSSELL

All rights reserved. No part of this publication may be reproduced, distributed, or transmitted in any form or by any means including photocopying, recording, or any electronic or mechanical methods without the prior written permission of the publisher except as noted. Publication purchasers may reproduce forms contained in this publication when done for their personal use. No claim is made to copyright or ownership of government materials.

Publication Description:

Title: Davenport's Louisiana Wills And Estate Planning Legal Forms

Edition: First, 2018

Authors: Alex Russell

Publisher: DAVENPORT PRESS, 54 Amelia Ave., West St. Paul, MN 55118

NO ATTORNEY-CLIENT OR OTHER RELATIONSHIP IS AGREED TO OR CREATED BY THE PURCHASE OR USE OF THIS PUBLICATION. Publisher and authors say, declare, and warn this publication is not to be considered the rendering of legal, accounting, or other professional services.

TABLE OF CONTENTS

CHAPTER 1 – GUIDE TO BOOK AND FORMS	1
CHAPTER 2 – BASIC PROBATE LAW AND PROPERTY LAW	4
CHAPTER 3 – MARRIED AND COMMUNITY PROPERTY IN LOUISIANA	8
CHAPTER 4 – WILL BASICS	11
CHAPTER 5 – GIFTING IN WILLS	16
CHAPTER 6 – FORM 1: LAST WILL AND TESTAMENT (SPOUSE)	20
CHAPTER 7 – FORM 2: LAST WILL AND TESTAMENT (STANDARD)	26
CHAPTER 8 – FORM 3: LOUISIANA HEALTH CARE POWER OF ATTORNEY	32
CHAPTER 9 – FORM 4: LIVING WILL	39
CHAPTER 10 – FORM 5: LOUISIANA PHYSICIAN ORDERS FOR SCOPE OF TREATMENT (LaPOST)	42
CHAPTER 11 – FORM 6: DECLARATION ON FINAL WISHES	46
CHAPTER 12 – FORM 7: DURABLE GENERAL POWER OF ATTORNEY	49
APPENDIX A: HOW TO DOWNLOAD LEGAL FORMS	58
APPENDIX B: SAMPLE FILLED OUT LEGAL FORMS	59

CHAPTER 1

GUIDE TO BOOK AND FORMS

THIS BOOK COVERS WILLS, ESTATE PLANNING LAW, AND FORMS

This book covers Louisiana Wills and Estate Planning which involves using legal documents to control things on illness or death. Issues include controlling health care, end of life issues, gifting property and money, using property and money, access to records, young children, and funeral and burial wishes. This book provides in one convenient place a review of law and ready to use legal forms. To reduce confusion and skimming this book is kept very short. Wills and Estate Planning forms often just do basic things, and often are not vital but save latter worry and costs.

BOOK AND FORMS PROBABLY SUITABLE IF USUAL SITUATION AND WISHES

This book and its forms should be suitable for people with usual situations and wishes. But people with unusual situations or wishes probably should not use this book and forms, and they may need a lawyer instead. Some “unusual” situations or wishes maybe making this book and its forms unsuitable are: a) wealth over \$5 million, b) complex family situations, c) unusual wishes for property or money, or d) big family medical concerns (like long-term care, special needs, poor health, or extreme age). In life people must weigh likely costs and benefits of using a lawyer for many things. Unfortunately using a lawyer can take a few visits over months and cost \$1000s, and often forms are redone every 3-5 years which can raise costs ten-fold over a lifetime. **This book is not a substitute for legal advice and no lawyer-client relationship is created by this book.**

THIS BOOK HAS MANY FORMS BUT MOST PEOPLE ONLY USE A FEW FORMS

This book covers and provides several legal forms that can make binding legal documents if completed, but most people only use a few forms. The legal forms in this book are:

1. **Last Will And Testament (Spouse)**. This 1st form lets a person say on their death many things, like faster less costly legal procedures can be used, who is executor to handle things, pick guardian for minor children and any minor’s property and money, and make gifts of property and money. This book’s 1st form says if a spouse survives they get everything but then they can make voluntarily small transfers to carry out the dying spouse’s wishes.

2. **Last Will And Testament (Standard)**. This 2nd form lets a person say all the same things as in

this book's 1st Will form, and this book's 2nd form does not mention a surviving spouse, and this form is meant for single persons or those married who want to try to make many gifts.

3. **Louisiana Health Care Power Of Attorney.** This form lets a person be named to control health care in case a person is unable to do this themselves, like due to later unconsciousness. There is a space to give instructions. A small card can be used to show this form has been done.

4. **Living Will.** In Louisiana this form can only be done by the few with terminal and irreversible condition, and in this form they can say which care they decline like CPR, tube feeding, and more.

5. **Louisiana Physician Orders for Scope of Treatment (LaPOST).** This form is rarely used but lets a person decline care like CPR, and the form is meant to be read seen by paramedics and others.

6. **Declaration on Final Wishes.** This form lets a person give orders for funeral and burial and related issues, rather than leaving decisions up to closest family.

7. **General Durable Power of Attorney.** This form lets a person share power with another to act, like power to access accounts, sell property, or get information, so they can help do things.

SOME DOCUMENTS ARE NOT USED OFTEN AND ARE NOT IN THIS BOOK

Some legal documents are not used often and are not covered in this book.

“**Codicil**” forms let a person change or cancel part of a Will, however it is usually better just to write a whole new Will which cancels the old Will and lays out everything again.

“**Revocable Living Trust**” papers may be suggested to transfer, item by item, most of a person's things into a trust for years, mainly to have things transfer faster after a death and avoid small costs and maybe a probate process. However (despite much talk from lawyers in ads) this is rarely done and if done can make living and paperwork difficult for years.

“**Childrens Trust**” papers may be suggested to have a trust manage property and money of a minor especially under 18. But in the rare event minor children would get a lot of property and money, usually the law or a Will already lets a minor's parent or a named guardian hold and use the minor's things for them until by age 18 hopefully children have matured.

“**Organ Donation**” forms usually are done as part of other forms like for a drivers license or state ID. Doing donations as part of these is best. Also a person's family can later consent to organ donation if the person who died did not forbid it.

“**Guardian**” forms can name persons to watch minors and their property after death, but usually a Will already does this.

DOWNLOAD OR PHOTOCOPY FORMS, READ INSTRUCTIONS, FILL IN BLANKS

To get forms people using this book can 1) download forms free as Appendix A explains, or 2) photocopy pages from this book. Book pages that are forms do not have bottom page numbers. Each form in this book has its own chapter with instructions on how to fill out and sign it. When filling out forms people can use a computer or just handwrite to add words, but people should be sure to handwrite signatures and nearby dates in permanent pen or marker. If someone chooses to handwrite they should write clearly and legibly. Most forms clearly show with blank spaces and underlining where to add words and signatures (like, “I name _____ as Agent”). This book shows some ways to add or change words in forms, but making changes to forms is not recommended.

CHAPTER 2

BASIC PROBATE LAW AND PROPERTY LAW

SOME IDEAS AND WORDS ARE BASIC TO WILLS AND ESTATE PLANNING

Some ideas and words are basic to Wills and Estate Planning.

- A person who has died is described as “deceased” and called a “decedent”.
- A “Will” is a document made by a person to control issues after their death. A Will is often called a “Last Will and Testament” and anyone doing a Will is called “Testator”. A Will has no effect until a person’s death so they are still free to sell, gift, or throw away things during life.
- “Property” is anything of value and is: 1) “real property” which is land, buildings, and fixtures attached to land or buildings, or 2) “personal property” which is anything else like money, accounts, investments, jewelry, clothing, furniture, appliances, equipment, vehicles, accounts, and cash. The term “property” includes money in any form, like cash on hand or in accounts.
- A “beneficiary” is a person getting things without fully paying, like from a gift in a Will. After someone’s death those getting anything are called a “legatee” getting a “legacy”, and the term “bequeath” also can be used. However often simple words like “gift” and “give” are used.
- “Heir” is a person who gets something on a death due to a Will or state law (they “inherit”).
- “Probate” (also called “Succession” in Louisiana) is a legal process to help after a death to transfer property, pick guardians, show people things were done fairly, and handle owed creditors. In Louisiana (despite concerns) often probate processes can be avoided or less costly methods used.
- An “Executor” or “Administrator” is a person in charge of a person’s affairs after their death, and often this is a spouse, adult child, or friend. In older times “Executrix” was used if a woman.
- A “Guardian” is one in charge of a minor’s person or property or who helps another person, and in Louisiana usually the term “tutor” is used too. In older times “Tutrix” was used if a woman.
- The word “respectively” means “in the same order just said or listed”. For example, “I give to Jim and Karen a boat and dress respectively” means Jim gets a boat and Karen a dress.

■ A “statutory form” is a form put in law by state legislators to be used (or as a sample). Some forms are so standard even most lawyers use them despite not being found in law.

■ “Notary” (also called a “notary public”) is a person approved by the state to help make signing of certain documents more trustworthy by notarizing them with a stamp and their signature. They can be found at banks, insurance agents, courts, some copy places, or can be hired from the Internet or phonebook. Many forms require a notary be used or the document is not valid.

LOUISIANA LAW APPLIES TO RESIDENTS OR THOSE TEMPORARILY AWAY

Louisiana law applies to a Will and similar documents if a person resides in or plans to return to the state, even if the date is uncertain (so often this includes those in school or military).

“ESTATE” MEANS PROPERTY LEFT AFTER A PERSON DIES

Property of a decedent that on death did not transfer automatically to other owners is called the “estate” of a decedent, or the “probate estate”. Property that a person had but which by some means transfers automatically on or soon after their death, such is not part of the estate. Note, after a death there may be an “estate” run by the person who is executor to do things and temporarily hold property, and a decedent’s accounts and other property might be renamed for a few months like “Estate of [decedent]”.

“NON-PROBATE PROPERTY” TRANSFERS AUTOMATICALLY NOT BY WILL

Property that for some reason automatically transfers on or soon after death from a deceased to new owners is “non-probate property”, and such property transfers as arranged even if a Will names the property. Examples are if there are a) “beneficiary” forms that name someone to get accounts or other things, b) transfer-on-death or pay-on-death accounts naming someone, c) property is held so on death rights go to another, or d) insurance forms are done so a person is named to get the insurance. Often pensions, retirement accounts, government benefits, or similar go by some automatic means. Arranging non-probate transfers can be called “avoiding probate”, but often this is not worth the cost and maybe hassles for years, or some property or money may be missed so a Will is still helpful. Basically when doing a Will people should consider non-probate transfers that may occur and plan accordingly.

OWNERSHIP DETERMINES WHAT CAN BE GIFTED ESPECIALLY IF MARRIED

A person can only gift by Will or other way property and money they own. Basically, people doing a Will should review papers or ask to know what they own and can give away. As explained later in this book, married persons should consider what is community property so 50% owned by any spouse. A Will has no effect until a person's death, so a person is still free to sell, gift, or throw away things during life even if things are named in a Will.

IF NO WILL THEN "INTESTATE" LAW CONTROLS THINGS ON DEATH

"Intestate" means to die with no Will, and if this occurs Louisiana intestate law directs a person's property and money on their death. Most don't like the complex and maybe unfair results this leads to especially by not giving enough to a surviving spouse so many write a Will. Note, Louisiana has "community property" where married persons own a 50% interest with a spouse in most things plus maybe they have a little "separate property". Overall, intestate law says:

- If a person dies with no surviving spouse but descendants like children or grandchildren, then all both community and separate property goes to descendants, and if a descendant would get a share if living but has died then any child of theirs take in their place (called "representation");

- If a person dies with a surviving spouse and descendants, then descendants get the deceased's separate property, and the surviving spouse gets the right to use the deceased's half of community property for life or until remarriage (this right to use is called a "usufruct" and includes power to spend cash or bank accounts) and after this it goes to descendants, and for all property if any descendant has died then their children take by "representation" in their place;

- If a person dies with a surviving spouse and no descendants like children or grandchildren, then the spouse gets the deceased's half of community property fully (not just right to use), and the deceased's parents get the right to use separate property for life after which it goes to the deceased's siblings or their children in their place by representation;

- If a person dies without any of the above relatives, usually more distant relatives get things, and only if there are no such other relatives does it go to the state of Louisiana.

PROPERTY IS FIRST USED TO PAY OFF DEBTS TO CREDITORS BEFORE WILL

Usually all creditors and debts owed by a decedent must be paid before gifts made by Will or other transfers occur. Also, expenses arising after death like funeral, maintenance of property, and

any probate costs must usually be paid first. Helpfully debts like credit cards or loans are often not a big issue since no one insists these be paid early rather than continue on the existing schedule. But paying creditors and debts can use up some of a decedent's property and money, so what debts will have to be paid first should be considered when writing a Will.

SECURED DEBTS LIKE MORTGAGES AND CAR LIENS GO WITH PROPERTY

In Louisiana secured debts like mortgages or car liens go along with the property they are tied to unless special circumstances are shown. So usually giving real estate with a mortgage means the recipient gets the property subject to the mortgage. But if wanted a person doing a Will is free to order a debt paid, or easiest of all to just also give money to pay off such debts if wanted.

USUALLY NO EXTRA FEDERAL OR STATE TAX IS OWED ON A DEATH

Usually people do not owe tax as a result of their death, despite what many think. First, the "Federal Estate And Gift Tax" does tax transfers made in life or that occur on death along with some insurance, but it only starts when a tax credit is used up that covers nearly \$5,490,000 after 2016. Second, Louisiana has abolished its estate and other taxes that might apply upon death.

CHAPTER 3

MARRIAGE AND COMMUNITY PROPERTY IN LOUISIANA

SPOUSES OFTEN OWN PROPERTY AS “COMMUNITY PROPERTY” OWNED 50/50

In Louisiana a married person’s property and money is usually mostly “community property” and is owned 50/50 by both spouses. Community property can greatly limit gifts a person can make in a Will or otherwise, since rarely does a recipient want to get property they must share with a surviving spouse. The usual rule is property or income gained during marriage is owned as community property, and this applies despite only 1 spouse being listed as the owner, and general earnings are usually community including even a person’s wages are community property. Community property is different from “separate property” that a person owns all of. Community property of a married person can occur if a) it was owned before marriage, b) it was a gift or inheritance directed to one spouse rather than to both spouses jointly, or c) it is a reinvestment or proceeds or income directly tied to other separate property. There is a presumption that absent clear evidence that property or money is community property. A single person who dies usually has only separate property so avoids these issues. Ways to do a Will and carry out gifting to handle community property are discussed later in this book. In rare cases people use a lawyer and in a long costly process do a pre-marital agreement or post-marital agreement approved by a court to avoid property being community property even if they are married.

IN RARE CASES SPOUSE CAN CLAIM MORE FROM RICHER DYING SPOUSE

This is rarely an issue but in Louisiana if a married person “dies rich” compared to the surviving spouse, which usually means with 5 times as much, then a surviving spouse can choose to demand a “marital portion”. The marital portion that can be claimed is usually 1/4 the probate property of the deceased with various modifications based on number of children. Importantly, the value of property and money to be received by Will is deducted from the portion that can be claimed by a surviving spouse – so if a Will is generous and gives a spouse half or most things then often nothing more can be claimed. Note, this is separate from community property issues which often do give a surviving spouse the right to claim a lot or parts of property and money.

DIVORCE REMOVES SOME BENEFITS TO EX-SPOUSE BUT NOT INSURANCE

In a person writes a Will while married and then divorces, then Louisiana law automatically removes most benefits going to the now ex-spouse since the law presumes it is no longer wanted. This includes any Will gifts to the now ex-spouse are cancelled, and Will clauses appointing them to be executor or trustee are cancelled. Only clear language referring to the chance of divorce can overcome this. Insurance however does not automatically change upon a divorce so people should quickly change insurance policies after a divorce.

DO NEW WILL IF DIVORCE, MARRY, SPOUSE OR BENEFICIARY DIES, OR MOVE

Divorcing, marrying, a spouse or beneficiary named in a Will dying, or moving to a new state, all can have major legal effects. If any of these deaths occur, it is recommended people do a new Will and review other papers.

OFTEN MARRIED PEOPLE IN WILL GIFT ALL TO ANY SPOUSE, THEN OTHERS

Married persons with a spouse who may survive them must decide what to do in a Will.

Option 1 is commonest and married persons simple do a Will giving all to their spouse.

Such a Will often says as follows: a) first all to any surviving spouse, and b) second if they die with no surviving spouse then it has Will gifts to other persons who are named to get certain things. This book's 1st Will form uses this option. This is done because much of a married person's property is community property so owned 50% by each spouse so hard to gift, and since a surviving spouse needs resources to live on. Importantly, often married people discuss wishes with a spouse or write a note to ask a surviving spouse voluntarily transfer certain things and moneys which often is voluntarily done if these are minor and fair. For example, some people may write a note to their spouse saying: "In my Will I legally gave all to my spouse, but I hope my spouse will make the following gifts: Buick to son Jon, furniture to Bev Huk and Mary Puck, \$90 to Kim Lee ..."

Option 2 for married persons is less common and not recommended, and with this a married person writes a Will that first gives various items and moneys to others, and then at Will end it gifts the remainder or residue to the spouse by name. This option hopes any surviving spouse will not claim the 50% community property interest they may have in things given, or it gifts in the Will only property that is separate property. This book's 2nd Will form can be used for this Option 2.

OFTEN PEOPLE GIFT ALL TO SPOUSE BUT IF SPOUSE DIES RE-DO WILL

To avoid many problems involving married persons, many persons a) while married use a document like this book's 1st Will form giving all or most to a spouse, and b) when their spouse dies they re-do their Will and use a document like this book's 2nd Will form to give to others. A spouse dying is major enough it should trigger a lot of review of legal documents like this.

CHAPTER 4

WILL BASICS

“WILL” IS DOCUMENT OFTEN DONE TO CONTROL ISSUES AFTER DEATH

A "Will" is a legal document that can be done by a person of sound mind to control many issues that may arise after their death. There is no minimum age but normally only those 16 or older do a Will. Not doing a Will can cause confusion, costs, hearings, delay, and family fights. A Will is often called a “Last Will and Testament” and person making a Will called the “Testator”. Louisiana does not allow a “joint” Will covering the wishes of more than one person. If a person doesn’t understand and can’t read a Will all in English then a lawyer should be talked to.

WILL NEEDS DATE, DECLARATION, SIGNING, 2 WITNESSES, NOTARY

To be valid, most Louisiana Will needs the date to appear somewhere but this can be written in or typed in well before signing. Next, to be valid most Louisiana Wills need the person doing the Will to declare or indicate it is their Will, like by saying: “This is my Will and I want you 2 to witness it.” Next the person doing the Will must sign in presence of 2 witnesses and notary both on every separate page and at end. Next, there must be 2 witnesses who witness the signing and then sign themselves in the presence of each other and the Will maker and the notary. Last, a notary (notary public) must see everyone sign who then signs and notarizes. A Will with all this is called a “notarial” Will (this use to be called a “statutory testament”). So in Louisiana a normal Will needs:

1) date, Will maker saying it is his or her Will, and Will maker signing each page and at end before 2 witnesses and notary,

2) signature of 2 witnesses in everyone’s presence, and

3) notary signing and notarizing in everyone’s presence.

Note, the Will is not normally read to witnesses, but often they read or have read to them the paragraph at end they sign but this is not required. Signing should be done in normal pen or marker.

WITNESSES CAN BE MOST ANYONE BUT BEST IF NOT GETTING WILL GIFTS

A witness can be almost anyone so long as: a) 16 years or older, b) able to see and hear (not blind or deaf), c) able to read and sign their name, and d) usually they should be someone without a serious history of crime or dishonesty. Witnesses can be persons named as executor or guardian.

Importantly, if a person acts as needed witness then a Will gift to them or to their spouse is void usually (except to degree as close family such person would get things by law if no Will). So usually a spouse or close family are not witnesses and instead used are friends or distant family.

“OLOGRAPHIC” WILL WITHOUT WITNESSES NOT RECOMMENDED

Besides the normal Will described above, Louisiana law also allows an “Olographic” Will which has a) a date, b) is signed at end, and c) is totally written by hand by the person making the Will (with no part typed, computer printed, or part of a form). Olographic Wills do not need witnesses or a notary but are rarely used as they are more likely to have mistakes, leave out vital parts, be sued over, and later require persons testify about handwriting or an expert be hired. But some people especially in an emergency do handwrite a Will like: *“WILL This is my Will and I want my spouse to be independent executor and get all my property and money but if she does not survive me all should go to my children, and I want my oldest living brother or sister to be guardian and tutor of my children and their property. I do this Will on June 1, 2017 and I sign as follows.”*

LOUISIANA HAS ABOLISHED “MYSTIC”, “SECRET” OR “ORAL” WILLS

Louisiana law in 1997 abolished and no longer allows certain Wills which involved different kinds of Wills, like with parts said orally or keeping parts secret. These other kinds of Wills were called things like “mystic”, “nuncupative” by public act or private act, “secret”, “oral”, military or seamen Wills, or other terms. People should know these other Wills were abolished, and now the 2 options are a Will with 2 witnesses and a notary (called “notarial”) or a wholly handwritten Will (called “olographic”).

LOUISIANA HAS NO SELF-PROVING AFFIDAVIT OR SIMILAR DOCUMENT

Unlike some states, Louisiana has no self-proving affidavit or similar document that is optional to make things easier later.

KEEP WILL IN SAFE PLACE IT WILL BE FOUND AND WHEN USED IT IS PUBLIC

Once done a Will should be kept in a safe place where it will be found within days of death such as a desk, filing cabinet, or in a safe or safety deposit box (if someone else has access). Some people give a Will to a spouse or friend or at least tell them where to look. In any legal

process most persons get a copy of documents so usually a Will is seen by people. The Louisiana Secretary of State has a Will Registration Form where a person can say where people should look for a Will, but the actual Will of someone is not filed.

WILL CAN BE REVOKED BY TEARING UP, NEW WILL OR HANDWRITTEN PAGE

To cancel or “revoke” a Will, a person can either a) tear up or destroy the old Will, b) do a new Will that says it revokes the old document, or c) do a signed document all in the person’s handwriting saying that a Will or parts of such are being revoked. Revoking a Will may bring back into force earlier Wills so it is usually best to do a whole new Will to make any changes.

DO NEW WILL IF DIVORCE, MARRY, SPOUSE OR BENEFICIARY DIES, OR MOVE

As said, divorcing, marrying, a spouse or beneficiary named in a Will dying, or moving to a new state, all can have legal effects. If any of these occur, it is recommended people do a new Will.

IN WILL CAN NAME “EXECUTOR” TO HANDLE MATTERS AFTER DEATH

Most Wills name an “executor” to if needed do things after a death like manage probate, find and transfer property and money, do paperwork, and pay bills. In older times this person was called an “executrix” if the person was a woman, or also called an “Administrator”. The person named must be at least age 16 and competent, and this is often a spouse, adult child, or friend (or a lawyer or bank if they agree). If needed and no Will names an executor, a judge in a costly, long hearing picks from a spouse and family who may argue about this. Naming two persons to both be executor can cause delay or fights. A person guilty of a felony or similar usually should not be executor. The person who is named executor can be getting Will gifts and can be named as guardian in a Will.

EXECUTOR CAN SEEK 2.5% FEE FOR THEIR WORK BUT OFTEN WAIVE THIS

In Louisiana for their work an executor’s fee of 2.5% of the estate value can be claimed, or more if extra work is needed. However often this is not claimed as an executor paid this will face income tax on this amount, but they face no such tax if money is left in the estate to pass by Will.

WILL SAVES TIME AND MONEY BY ALLOWING “INDEPENDENT” EXECUTOR

In most Wills a provision says the executor can act as “Independent” executor acting without

court supervision, so need not get a judge's approval and hold as many hearings. This is usually wanted as it saves time and costs, and the person chosen to be executor is trusted so supervision is not needed. If later anyone wants it they can request hearings. This book's 2 Wills forms allow this.

WILLS HAVE LONG MISCELLANEOUS PART TO HELP AVOID PROBLEMS

Most Wills have a long miscellaneous section with many sentences of legal language that help avoid several legal problems that seem to occur often. People may not understand all these sentences, but should trust the language used is there for a reason. Also, most Will forms say singular, plural, or gender meaning of words will be ignored which lets people write in blank spaces anything they want without worrying about things not matching in these ways.

WILL NAMES "GUARDIAN" OR "TUTOR" TO CARE FOR MINOR AND PROPERTY

If a parent dies with a child who is a minor under 18 then usually the other natural or adopted parent (but not a step-parent) takes over automatically unless found "unfit" by a court which is rare. But in case needed a parent in a Will can name a "guardian" to care for a minor. Also, in a Will a "guardian" can also be named to care for a minor's property and money, to manage it, and decide how to spend it for their benefit, til when an adult they get all left. In Louisiana these guardians are also called "tutor", and in older times "tutrix" if this was a woman. Often the same 1 person who is "guardian" of the person caring for the minor is also named guardian of their property and money, to avoid delay and hurt feelings. Naming 2 persons to jointly act is not usual and may lead to disagreements or delay, but sometimes an old married couple is named. If needed and no Will names a guardian a judge in a costly, long hearing picks from family who may argue about this. Basically in a Will since naming the other parent as guardian of the person is pointless (they take over unless unfit), and few children get much property or money unless both parents are dead, most people name for this a healthy relative or friend and not the other parent. This book's 2 Will forms both have a space to name 1 person to be guardian and tutor of any minor's person and property.

IF NO MINOR CHILD AND NOT GIVING TO MINOR CAN SKIP GUARDIAN CLAUSE

Those without minor children and not giving things to minors can skip or fill in anyway a guardian clause. As said above, in Louisiana a guardian for minors is also called a tutor.

WILL CAN HAVE “ALTERNATE” EXECUTOR OR GUARDIANS BUT THIS IS RARE

In the rare case a person named in a Will as executor or guardian dies or is unavailable, most people can just write a new Will or a judge will pick someone to serve if needed. But it is possible to name alternative persons to serve, which can be done with help from a lawyer or by writing something like: “or if they are reasonably unable to serve I nominate _____ to serve”.

MAIN USE OF WILL IS TO SAY ON DEATH HOW PROPERTY AND MONEY GOES

The most common use of a Will is to say upon a death how property and money should transfer, including saying who gets what. The next chapter of this book explains Will gifting.

CHAPTER 5

GIFTING IN WILLS

GIFTS OF PROPERTY AND MONEY IN WILL DONE USING SIMPLE WORDS

The main use of a Will is for a person to say on their death how they want their property and money to transfer. Note, in a Louisiana Will a gift is also called a “legacy” and the person receiving such a “legatee”, and Will gifts can also be called a “bequest” which are “bequeathed”. However in a Will often simple words to make a gift are used, like: “I give _____ to _____”.

PERSON IS MOSTLY FREE TO GIFT IN WILL AS WANTED

In Louisiana a person is mostly free to gift their property and money in their Will however wanted. Some persons especially if married may face restrictions on gifts which this book explains.

REMEMBER A PERSON CAN ONLY GIFT IN WILL PROPERTY THEY OWN

A person writing Will gifts should remember that technically they can only give away the property or parts of property and money they own. For married persons there is a chapter in this book explaining this further. Ownership in Louisiana can be complicated and may involve some research to see what one owns. One complication is does recognize “joint tenancies” or “joint tenancies with right of survivorship”, so any language like this if seen should be investigated and maybe fixed.

CAN USUALLY GIVE NOTHING AND “DISINHERIT” ADULT CHILDREN OVER 23

Louisiana law says you can’t “disinherit” and not give a fair share to a child if a) the child is 23 or younger at time of the death, or b) the child is disabled or similar so can’t support themselves. Even such a child can be disinherited for certain misconduct. Given all this, only rarely can a child say they are a “forced heir” and demand a “forced portion” which can be 25% of estate assets. Also usually any parent with a young child or disabled child does give a fair share to them anyway, so they have no grounds to complain legally. Louisiana laws used to be much tougher on this issue.

“PARTICULAR” GIFTS IN WILL ARE DONE FIRST BEFORE OTHER GIFTS

Louisiana law says a “particular” gift where something in particular is gifted will be carried

out first, compared to other Will gifts that for example just name a broad category or the residue. These other kinds of gifts are called “general” and “universal” legacies and can be legally risky, so most people avoid gifts by broad category except for having 1 final gift of the leftover residue. This order of gifting where particular gifts come first matters if a Will maker may not have enough property after debts are paid. Many Wills also in small print say to carry out gifts of the same type in the order they appear in the Will. Particular gift examples are: “I give by UBank account ending #8473 to Jill Baker” , “I give all jewelry to Sue Pond” and “I give \$9,000 to Sue Kent”).

SEVERAL CAN GET SAME GIFT TO SHARE EQUALLY OR BY PERCENTAGES

The same property or money can be gifted to several people to share, either equally if a gift does not say particular shares, or with different shares like by giving percentages. Examples are: “I give AmBank account ending in 8483 to Ed Coe and Jill Hill” or “I give 44 Smith Street, New Orleans 40% to my son Harry and 60% to my friend John Hart”. Most Wills also say a gift will be sold and money passed on if beneficiaries getting the same thing don’t agree how to share it.

WILLS HAVE HELPFUL “RESIDUE CLAUSE” TO HANDLE ANYTHING LEFTOVER

Most Wills have a “residue” clause toward their end where any property or money not given by earlier Will gifts is gifted to whoever is named there. This residue clause is sometime called the “catch all” clause. Importantly, some people skip all other gifting and just name 1 person or a few persons to get everything through the residue clause. Often in a residue clause a person writes their spouse, their children equally, or a few close friends equally. An example of a residue clause is: “Except as otherwise provided above, I leave and give the balance of my estate and the residue of my property of which I die possessed, both real and personal, to _____.

IF BENEFICIARY OF WILL GIFT DIES “RESIDUE CLAUSE” CAN HANDLE THIS

As said above, if someone named in a Will dies is it recommended people write a new Will. But in case someone named to get a Will gift dies, then the “residue” clause is there to say any such property of such gift leftover since recipient died should go to who is named in the residue clause.

IF BENEFICIARY DIES AND WAS WILL MAKER’S CHILD, DESCENDANTS GET

As said above, is someone named in a Will dies is it recommended people write a new Will. But in case this occurs with close family Louisiana law presumes if the Will maker’s child dies

before they can get a Will gift, then it would be wanted their descendants get their share and the law automatically does this (i.e., if a decedent's child has died but there are grandchildren from him or her then they take that share). This is called such persons taking "by root", which in other states is called "per stirpes" which means by branch of the family. Both the 2 Will forms in this book say if one named in the residue clause has died, and if there are some descendants of them, then they take in that person's place. This also automatically happens with any gift if the person dying was descendant of the Will maker.

WILL NEED SUFFICIENT NAMING OF PERSONS WITH FULL NAME OR SIMILAR

The person doing a Will should usually use their full legal name in all places, including when signing. But it is OK if someone is commonly known by another name to use that, especially if people dislike using their legal name. To avoid confusion a person can write things like: "My name is Sissy Smith and my official legal name is Susan Beth Smith". Next, to name those getting Will gifts full names are best, but really names just be must so an executor after investigating can reasonably tell who was meant. For example though full names are best it is OK to make gifts of : "\$80 to my son Cole" , "oak bench to neighbor Aaron" and "\$50 to Jodie from work". Note, when making a Will a person can call up a charity to get the official name or people can just explain how the charity is known (like "the local animal shelter" or "St. Joe's my old church"). In Louisiana people cannot give property or money to an animal, but some people write a thing like: "I give \$900 to Ben Hill in the hope he will care for my dog Fido".

WILLS NEED SUFFICIENT DESCRIPTIONS OF PROPERTY GIFTED

Property in Will gifts must be described so an executor after investigating can tell the likely meaning. This is usually easy as most people only own one of something to give. For real property using a correct "legal description" is best (like "Lot 2, Block 4 of Polk's Subdivision, Colby Parrish, Louisiana") but a gift giving property by street address is allowed. Examples of gifts with good descriptions are:

"I give Ubank account ending #9283 to Mary Bing",

"I give tools usually kept in my garage and also my biggest gold ring to Vera Kline", and

"I give the house and land at 92 Toatt Avenue, Berry, LA, to Ann Joy Nox".

LOUISIANA DOES NOT ALLOW “GIFT LISTS” OUTSIDE WILL

Many states allow a person to with less formality than required for the Will, to make a list of gifts of items to go to various people. This may be called a “tangible personal property list”, or “property memo”, or involve using stickers on household items with names. But Louisiana law does not recognize this as legally binding, and only if everyone involved later voluntarily agrees to follow it later would this work. Some people do still try doing this, maybe by making a list saying “It is hoped people voluntarily agree to carry out these gifts: furniture to son John, boat to Berry...”

CHAPTER 6

FORM 1: LAST WILL AND TESTAMENT (SPOUSE)

WILL FORM 1 (SPOUSE) GIFTS ALL TO ANY SURVIVING SPOUSE THEN OTHERS

This book has 2 Will forms to pick from. Form 1 is provided in this chapter, and is a Will that most married persons will want to use. This Will gifts all to any surviving spouse, and then has spaces to write in gifts to occur just in case the spouse later dies. This Will is often done by a married person because a surviving spouse may have “community property” rights to most property so not giving them most would be difficult, and since they need resources to live and raise a family. To carry these things out, in this book’s 1st Will form there is:

first, a clause giving all to any surviving spouse,

second, a clause saying only if there is no surviving spouse then to be made are certain particular gifts to others, with spaces to fill out to make such gifts (i.e., I give _____ to _____); and

third, a “residue clause” saying if anything it left is should be directed to the persons named in this clause.

FORM 2 (NORMAL WILL) IS FLEXIBLE WILL FOR MOST SINGLE PERSONS

Form 2 (Normal Will) is provided later in this book, and it is a Will meant for most single persons or for married persons who want to first make small gifts to persons not their spouse.

CAN COPY GIFT LINES TO ALLOW MORE GIFTS TO BE MADE

A person who wants to make more gifts can just cut and paste, or handwrite in, more of the lines that say gifts are being made. If using a computer this can be done easily. Some people want to make dozens and dozens of Will gifts, so have to add gift lines. Some people don’t want to make many gifts, so may want to remove gift lines. Of course gift lines can just be left blank if unneeded.

BOOK’S WILL FORMS HAVE PLACES TO NAME GUARDIANS AND EXECUTOR

All this book’s Will forms have a place to name a guardian to care for the person of any minor child (in case their other parent is unavailable), and to act as guardian to care for the property or money of a minor until they are older. In Louisiana this is also called a “tutor”. This book’s Will form has 1 space to name the same person to act as both kinds of guardian to avoid delay and fights.

The space for naming guardians is often left blank if a person has no minor children and no minor is likely to get Will gifts. Often the person named guardian is next closest family or friend after a spouse. Lastly, his book's Will forms have space to name an executor to if needed handle things after a person's death. Often the executor is a spouse, and if no spouse next closest family or friend.

LAST IN WILL IS PLACE FOR WILL MAKER TO SIGN, 2 WITNESSES, AND NOTARY

The last part of this book's Will forms are things needed to make the Will legally valid. To make a valid Will in Louisiana involves a few steps:

- 1) Each page except signature page has a bottom line for the Will maker to sign each page;
- 2) Near end of a Will there is a place for the Will maker to sign, which should be done right after they indicate it is his or her Will, maybe saying: "This is my Will I want all to witness.";
- 3) Then there is a spot where the 2 witnesses who saw the testator sign, for them to then sign in each other's presence and with the notary there; and
- 4) Lastly there is a sport for the notary to sign and then notarize the document normally.

Note, the Will is not normally read to witnesses, but often they read or have read them the paragraph they sign. It is best if witnesses and notary are not getting any Will gifts. Signing should be done in normal pen or marker. In Louisiana the person making a Will is called the "testator".

KEEP WILL IN SAFE PLACE IT WILL BE FOUND

After signing a Will should be kept in a safe place where it will be found within days of death such as a desk, filing cabinet, or in a safe of safety deposit box (if someone else has access). Some people give a Will to a spouse or friend or at least tell them where to look. Note, the Louisiana Secretary of State has a "Will Registration Form" to fill out and send in with \$10 to say where a Will is going to be kept but the actual Will is not filed, and after a death people can check with the Secretary of State to try to find a Will.

WILL CAN BE REVOKED BY TEARING UP, NEW WILL OR HANDWRITTEN PAGE

To cancel or "revoke" a Will, a person can either a) tear up or destroy the old Will, b) do a new Will that says it revokes the old document, or c) do a signed document all in the person's handwriting say that a Will or parts of such are being revoked.

FORM 1:
LAST WILL AND TESTAMENT (SPOUSE)

LAST WILL AND TESTAMENT

I, who am named _____, being of sound mind and body and wishing to make proper disposition of my property and do other things in event of death, make this my Last Will and Testament, revoking all prior Wills and Codicils.

GIFT OF ALL TO ANY SURVIVING SPOUSE

If at my death my spouse is still living, then I leave and give to my spouse the balance of my estate and the residue of my property of which I die possessed, both real and personal. I may have informed my spouse about certain wishes for my property and money including by writing them below, which wishes my spouse is not required to but may choose to carry out.

GIFTS OF PARTICULAR PROPERTY OR AMOUNTS OF MONEY

Except as otherwise provided above, I leave and give particular property or amounts of money as separate gifts as follows in this part (spaces may be left blank if not needed).

_____ to _____

_____ to _____

_____ to _____

_____ to _____

_____ to _____

_____ to _____

_____ to _____

Signature on each page: _____

GIFT OF RESIDUE

Except as otherwise provided above, I leave and give the balance of my estate and the residue of my property of which I die possessed, both real and personal, to

_____.

If I have named multiple persons if any are deceased then others named who survive take their share, except if any deceased person is my child or sibling (or a descendant of them) then their share shall go to their descendants by roots who exist at my death.

EXECUTOR

I name and appoint _____ as executor for me and of my estate with full seizin. My executor including any successor executor shall serve without bond or requirement they give any bond or surety. My executor including any successor executor is expressly given authority to act as independent executor without court supervision in as informal a manner as possible, and is expressly given the right to own or acquire property with any heirs or other beneficiaries or trusts and to do any action to the maximum extent allowed by law.

MINORS

If I am survived by minor children whose other parent is reasonably unavailable or has died, I name and appoint as tutor of the person and also tutor of the property of them _____ (this space may be blank if not needed).

OTHER PROVISIONS

In this document any reference to ending of words that indicate a particular gender or number should be disregarded, and any such usage is not meant to limit or imply anything, including testator also may refer to a testatrix and tutor to a tutrix.

Signature on each page: _____

Any property which would go to any minor may be delivered to the person who is a parent or the tutor of such minor.

All donations or gifts inter vivos I made to my children during my life are intended as extra portions, and collation and them paying back must not be required.

Gifts in this Will of the same type are made and should be carried out in the order written by any executor or court including if there is not enough to make all gifts.

Any gift going to more than one person may be sold including by any executor or court if they think recipients do not agree on how to use the gifted property.

SIGNATURE OF TESTATOR MAKING WILL

In presence of the undersigned notary and two competent witnesses, after due presentation and declaration by me that this is my Last Will and Testament, I have signed this document as Testator at the end and on each page, on the date immediately below.

Date: _____ Signature of Testator: _____

WITNESSES

In our presence the testator has declared or signified that this instrument is his or her testament and has signed it at the end of each other separate page, and in the presence of the testator and each other we have hereunto subscribed our names this _____ day of _____, 20____.

Signature of witness 1

Signature of witness 2

Signature of Testator making this Will

Notary Public

CHAPTER 7

FORM 2: LAST WILL AND TESTAMENT (STANDARD)

FORM 2 (STANDARD) IS FLEXIBLE WILL

This book has 2 Will forms to pick from. Form 2 in this chapter is a Will for most single persons, or for use by those married persons who want to first make certain careful gifts.

WILL FORM 2 HAS LAYOUT WITH A FEW PARTS

To carry things out, in this book's 2nd Will form there is:

first, a clause saying certain particular gifts are hereby made, with spaces to fill out to make such gifts (i.e, I give _____ to _____); and

second, a "residue clause" saying what is left goes to the persons named in this clause, and named often is a spouse, or named is all of person's kids, or named is a friend.

CAN COPY GIFT LINES TO ALLOW MORE GIFTS TO BE MADE

A person who wants to make more gifts can just cut and paste or handwrite in more of the lines that say gifts are being made. If using a computer this can be done easily. Some people try to show they remember people want to make dozens or hundreds of gifts. Similarly, people who don't want to make many small gifts can just remove gift line from the Will forms.

BOOK'S WILL FORMS HAVE PLACES TO NAME GUARDIANS AND EXECUTOR

This book's Will forms then have a place to name a guardian to care for person of any minor child and act as guardian for any minor's property and money til they are older. In Louisiana this is called a "tutor". This book's Will form has 1 space to name the same person to act as both kinds of guardian to avoid delay and fights. Naming a guardian is often left blank if a person has no minor child and no minor is likely to get Will gifts. Often the one named guardian is closest family or friend after a spouse. Lastly, Will forms have a space to name an executor to if needed do things after a death. Often the executor is a spouse or next closest family or friend.

LAST IN WILL IS PLACE FOR WILL MAKER TO SIGN, 2 WITNESSES, AND NOTARY

The last part of this book's Will forms are things needed to make the Will legally valid. To make a valid Will in Louisiana involves a few steps:

- 1) Each page except signature page has a bottom line for the Will maker to sign each page;
- 2) Near end of a Will there is a place for the Will maker to sign, which should be done right after they indicate it is his or her Will, maybe saying: "This is my Will I want all to witness.";
- 3) Then there is a spot where the 2 witnesses who saw the testator sign, for them to then sign in each other's presence and with the notary there; and
- 4) Lastly there is a sport for the notary to sign and then notarize the document normally.

Note, the Will is not normally read to witnesses, but often they read or have read them the paragraph they sign. It is best if witnesses and notary are not getting any Will gifts. Signing should be done in normal pen or marker. In Louisiana the person making a Will is called the "testator".

KEEP WILL IN SAFE PLACE IT WILL BE FOUND AND WHEN USED IT IS PUBLIC

After signing a Will should be kept in a safe place where it will be found within days of death such as a desk, filing cabinet, or in a safe of safety deposit box (if someone else has access). Some people give a Will to a spouse or friend or at least tell them where to look. Note, the Louisiana Secretary of State has a "Will Registration Form" to fill out and send in with \$10 to say where a Will is going to be kept but the actual Will is not filed, and after a death people can check with the Secretary of State to try to find a Will.

WILL CAN BE REVOKED BY TEARING UP, NEW WILL OR HANDWRITTEN PAGE

To cancel or "revoke" a Will, a person can either a) tear up or destroy the old Will, b) do a new Will that says it revokes the old document, or c) do a signed document all in the person's handwriting say that a Will or parts of such are being revoked.

FORM 2:
LAST WILL AND TESTAMENT (STANDARD)

LAST WILL AND TESTAMENT

I, who am named _____, being of sound mind and body and wishing to make proper disposition of my property and do other things in event of death, make this my Last Will and Testament, revoking all prior Wills and Codicils.

GIFTS OF PARTICULAR PROPERTY OR AMOUNTS OF MONEY

Except as otherwise provided above, I leave and give particular property or amounts of money as separate gifts as follows in this part (spaces may be left blank if not needed).

_____	to	_____
_____	to	_____
_____	to	_____
_____	to	_____
_____	to	_____
_____	to	_____
_____	to	_____
_____	to	_____
_____	to	_____
_____	to	_____
_____	to	_____

Signature on each page: _____

GIFT OF RESIDUE

Except as otherwise provided above, I leave and give the balance of my estate and the residue of my property of which I die possessed, both real and personal, to

_____.

If I have named multiple persons if any are deceased then others named who survive take their share, except if any deceased person is my child or sibling (or a descendant of them) then their share shall go to their descendants by roots who exist at my death.

EXECUTOR

I name and appoint _____ as executor for me and of my estate with full seizin. My executor including any successor executor shall serve without bond or requirement they give any bond or surety. My executor including any successor executor is expressly given authority to act as independent executor without court supervision in as informal a manner as possible, and is expressly given the right to own or acquire property with any heirs or other beneficiaries or trusts and to do any action to the maximum extent allowed by law.

MINORS

If I am survived by minor children whose other parent is reasonably unavailable or has died, I name and appoint as tutor of the person and also tutor of the property of them _____ (this space may be blank if not needed).

OTHER PROVISIONS

In this document any reference to ending of words that indicate a particular gender or number should be disregarded, and any such usage is not meant to limit or imply anything, including testator also may refer to a testatrix and tutor to a tutrix.

Signature on each page: _____

Any property which would go to any minor may be delivered to the person who is a parent or the tutor of such minor.

All donations or gifts inter vivos I made to my children during my life are intended as extra portions, and collation and them paying back must not be required.

Gifts in this Will of the same type are made and should be carried out in the order written by any executor or court including if there is not enough to make all gifts.

Any gift going to more than one person may be sold including by any executor or court if they think recipients do not agree on how to use the gifted property.

SIGNATURE OF TESTATOR MAKING WILL

In presence of the undersigned notary and two competent witnesses, after due presentation and declaration by me that this is my Last Will and Testament, I have signed this document as Testator at the end and on each page, on the date immediately below.

Date: _____ Signature of Testator: _____

WITNESSES

In our presence the testator has declared or signified that this instrument is his or her testament and has signed it at the end of each other separate page, and in the presence of the testator and each other we have hereunto subscribed our names this _____ day of _____, 20____.

Signature of witness 1

Signature of witness 2

Signature of Testator making this Will

Notary Public

CHAPTER 8

FORM 3: LOUISIANA DURABLE HEALTH CARE POWER OF ATTORNEY

FORM 3 LETS AGENT CONTROL HEALTH CARE IN CASE NEEDED

Form 3 is a standard form written by a Louisiana state agency that many attorneys copy and use. It lets a person be named to control health care just in case a person is later unable to do this.

CAN NAME AGENT TO DECIDE ON HEALTH CARE IF PERSON NEEDS HELP

When a person wants someone to act for them a form called a “Power of Attorney” is done to name a person to act as “agent” or “attorney in fact”. This is sometimes called a mandate or a procuration. Louisiana law lets a person give power over health care using a form like this, and this form is called the Louisiana Health Care Power Of Attorney. Note, using this form giving this power to another is not giving up power, and even after this a person keeps in control until for some reason they cannot decide things themselves or ask for help deciding. This form is often only used if a person is unconscious, can’t speak, is irrational, or is too tired to decide much so tells doctors to talk to and obey the agent. These kinds of health care documents are also called “Advanced Directives”.

USUALLY SPOUSE OR CLOSE FAMILY IS NAMED WITH ALTERNATE NAMED

Usually in a Health Care Power of Attorney a spouse or a close family member is named to make health care decisions if needed. This saves a spouse or other family from having to go to Court to get certain decision making powers, and normally they do not have much power. The form has a space to name an “alternative” person in case the first person is unavailable, but it is OK to skip this.

FORM HAS BOXES TO SHOW WHAT HEALTH DECISIONS CAN BE MADE

The form has several boxes to check or initial to show what kinds of health decisions can the agent make. It is recommended that all boxes are checked just in case.

FORM HAS LINE TO WRITE CARE WISHES BUT MOST SKIP THIS

The form has a small blank line to write in health care wishes like what care is not wanted. But is it usually best to not write much, and trust your named agent will do what is best and follow verbal instructions which the law requires they do. But if people want to write their wishes it can be

done on this Health Care Power of Attorney form on the small line provided or attaching extra pages if needed. Some people write to show less than full care is fine, like: “All should know my agent can say some care is not worth it” or “Take no extreme measures and try to save money.” Note, there is also a document called a “Living Will” covered in the next chapter where wishes for health care can be written too, but many people skip this because technically to use this doctors must find a person has a terminal irreversible condition.

COMPLETE FORM BY SIGNING WITH NOTARY AND 2 WITNESSES

To be valid the form after being filled out must be signed before a 2 witnesses and notary who then notarizes the document. The notary is technically not required but is standard and health care providers may want this. Witnesses must not be related by blood or marriage or with a legal right to any of a person’s estate under a Will or by operation of law, and usually should not be a spouse, and most often witnesses are a couple friends or distant family. To cancel the form a person while competent just has to tell the person named to be agent and usually tear up the form, and make sure anyone with copies knows it has been cancelled.

OPTIONAL WALLET CARD TELLS PEOPLE THERE IS AGENT

Some people use a handwritten or form “card” they keep in their wallet or on their person, which is often called a “wallet card”. This just says a person has a health care agent so people should talk to this person if needed. This book has such a card to fill out and keep nearby.

FORM 3:
LOUISIANA HEALTH CARE POWER OF ATTORNEY

LOUISIANA HEALTH CARE POWER OF ATTORNEY

1. I, who am named _____, hereby appoint:

Name

Home Phone Number

Home Street Address

Work Phone Number

City, State

Cell Phone Number

as my agent to make health-care decisions for me if I become unable to make my own health care decisions such as the following:

- ☐ A. Grant, refuse, or withdraw consent on my behalf for any health care service, treatment or procedure, even though my death may ensue.
- ☐ B. Talk to health care personnel, get information, have access to medical records and sign forms necessary to carry out these decisions.
- ☐ C. Authorize my admission to or discharge from any hospital, nursing home, residential care, assisted living or similar facility or service.
- ☐ D. Contract on my behalf for any health-care related services or facility (without my agent incurring personal financial liability for such contracts) such as surgery, medical expenses and prescriptions.
- ☐ E. Make decisions regarding surgery, medical expenses and prescriptions.

2. If the person named as my agent is not available or is unable to act as my agent, I appoint the following person(s) to serve in the order listed below:

A.

Name

Home Phone Number

Home Street Address

Work Phone Number

City, State

Cell Phone Number

B.

Name

Home Phone Number

Home Street Address

Work Phone Number

City, State

Cell Phone Number

3. With this document, I intend to create a durable power of attorney for health care, which shall take effect upon and only during any period in which, in the opinion of my attending physician, I am unable to make or communicate a choice regarding a particular health-care decision. My agent shall make health-care decisions as I direct below or as I make known to him/her in some other way. If my agent is unable to determine the choice I would want to make, then my agent shall make a choice for me based upon what my agent believes to be in my best interest.

4. With this document, I authorize any person, organization, or entity involved with my health care to disclose and release to my agent any and all of my individually identifiable health information and medical records in accordance with HIPAA.

5. SPECIAL PROVISIONS AND LIMITATIONS. I do NOT want any of the following treatments:

6. To the extent that I am permitted by law to do so, I herewith nominate my agent to serve as the curator of my person, and/or in any similar representative capacity. If I am not permitted by law to make a nomination, then I request in the strongest possible terms that any court consider this nomination.

7. No person who relies in good faith upon representations by my agent or alternate agent shall be liable to me, my estate, my heirs or assigns for recognizing the agent's authority.

8. The powers delegated under this power of attorney are separable, so that the invalidity of one or more powers shall not affect any others.

BY MY SIGNATURE I INDICATE THAT I UNDERSTAND THE PURPOSE AND EFFECT OF THIS DOCUMENT.

I sign my name to this form on _____, 20_____,
(Date)

at: _____.
(City, State)

(Signature)

WITNESSES

The person who signed or acknowledged this document is personally known to me and I believe him/her to be of sound mind.

First Witness

Signature: _____ Date: _____

Print Name: _____

Home Address: _____

Second Witness

Signature: _____ Date: _____

Print Name: _____

Home Address: _____

NOTARIZATION

STATE OF LOUISIANA

PARISH OF _____

I, _____ a Notary Public in and for the State and Parish aforesaid, do hereby certify that _____ who personally came and appeared before me as the Principal, and executed the foregoing Durable Power of Attorney for Health-Care in said State and Parish, and acknowledged said Durable Power of Attorney for Health-Care as the Principal's voluntary act.

Witness my signature this _____ day of _____, 20_____.

NOTARY PUBLIC

OPTIONAL CARD

(optional: cut and fill out several copies and date and sign,
then keep copies on you body and where it will be seen if you fall sick)

Notice to Health Care Providers (check boxes and fill out)

☐ I have done a Living Will for those with terminal
and irreversible conditions according to doctors.

☐ I have done a Health Care Power of Attorney and
appointed: _____ (Agent)

Phone: _____

as my agent to make health care decisions for me if I am
unable to do so. My agent has a copy of my complete
health care power of attorney.

Date: _____ My printed name: _____

My signature: _____

CHAPTER 9

FORM 4: LIVING WILL

FORM 4 LETS TERMINAL PERSONS SAY WHAT CARE TO NOT GIVE

Form 4 is the “Living Will” form, also called a “Declaration”, which is a statutory form found in Louisiana law. It lets certain people say they do not want certain health care. But most people skip this form, and mainly use the Health Care Power of Attorney form.

FORM IS RARELY USED SINCE LIMITED TO TERMINAL-IRREVERSIBLE CASES

This “Living Will” form unlike most states is limited by Louisiana law to people with “terminal or with irreversible condition” found by doctors. In other states there is no such limit on this document so Living Wills are more common elsewhere. As said, most people skip this form, and mainly use the Health Care Power of Attorney form. Importantly, on the form a person much check whether they do or do not want feeding and water tubes to be used to prolong life, which is called “nutrition and hydration”.

LOUISIANA SECRETARY OF STATE HAS LIVING WILL REGISTRY AND CARDS

For those few who do use this Living Will form there is a registry at the Secretary of State which a person can file to give notice they have done such a document. Also, people doing this form can get a card which indicates they have done this form and should not get care.

TO BE VALID SIGN FORM WITH 2 WITNESSES WHO SIGN

To be valid the form is signed before 2 witnesses who then sign. Witnesses must be persons who are sane, not related to the person either by blood or married, and not entitled to any of the person’s estate if he or she dies. To revoke the form usually a person can tear it up or destroy it, and then they use tell all persons who know of the form or have a copy it should not be followed.

**FORM 4:
LIVING WILL**

**STATE OF LOUISIANA
LIVING WILL
DECLARATION**

Declaration made this _____ day of _____, _____ (month, year).

I, _____, being of sound mind, willfully and voluntarily make known my desire that my dying shall not be artificially prolonged under the circumstances set forth below and do hereby declare: _____

If at any time I should have an incurable injury, disease or illness, or be in a continual profound comatose state with no reasonable chance of recovery, certified to be a terminal and irreversible condition by two physicians who have personally examined me, one of whom shall be my attending physician, and the physicians have determined that my death will occur whether or not life-sustaining procedures are utilized and where the application of life-sustaining procedure would serve only to prolong artificially the dying process, I direct (initial one only):

That all life-sustaining procedures, including nutrition and hydration, be withheld or withdrawn so that food and water will not be administered invasively.

That life-sustaining procedures, except nutrition and hydration, be withheld or withdrawn so that food and water can be administered invasively.

I further direct that I be permitted to die naturally with only the administration of medication or the performance of any medical procedure deemed necessary to provide me with comfort care.

In absence of my ability to give directions regarding the use of such life-sustaining procedures, it is my intention that this declaration shall be honored by my family and physician(s) as the final expression of my legal right to refuse medical or surgical treatment and accept the consequences from such refusal.

I understand the full import of this declaration and I am emotionally and mentally competent to make this declaration.

Signed _____

City, Parish, and State of Residence _____

WITNESSES: The declarant has been personally known to me and I believe him or her to be of sound mind.

Witness: _____

Witness: _____

CHAPTER 10

FORM 5: Louisiana Physician Orders for Scope of Treatment (LaPOST)

FORM 5 LETS PERSON SHOW QUICKLY CERTAIN CARE IS NOT WANTED

Form 5 in this book is the Louisiana Physician Orders for Scope of Treatment (LaPOST) form. It lets a person quickly show paramedics and other health care providers they do not want certain treatment.

FORM USED TO QUICKLY SHOW SOME HEALTH CARE IS NOT WANTED

This form lets a person show they do not want certain medical treatments, and paramedics, nurses, doctors or similar who see this form usually follow it. This form is meant to be quickly seen and followed. This form is fairly rare and most skip using it. A person doing a LaPOST form which is always filled-out with help of a doctor can say which care they want to decline, for example either a) CPR to help with breathing and heart, b) antibiotics to fight infections, c) intubation to help breathing, and d) tubes for feeding or liquids. Note, most people first do another form like a Health Care Power of Attorney, to name someone to make decisions if needed and state more detailed wishes.

TO DO FORM SIGN ALONG WITH PHYSICIAN AND KEEP FORM NEARBY

A LaPOST form to be legal must be filled out with help of a physician (usually one's doctor), and then signed by a person along with the physician signing. The form which is usually bright gold is then kept in all medical records to be followed. Some keep a copy on their person, maybe even pinned outside their clothes, so it is found if they are allowed to leave the hospital, hospice, or similar facility but then fall ill. To cancel the form a person while competent can just verbally say this or request care, then the form is usually removed from all files by medical staff.

FORM 5:
Louisiana Physician Orders for Scope of Treatment (LaPOST)

LOUISIANA PHYSICIAN ORDERS FOR SCOPE OF TREATMENT (LaPOST)

FIRST follow these orders, **THEN** contact physician. This is a Physician Order Sheet based on the person's medical condition and wishes. Any Section not completed implies full treatment for that section. Everyone shall be treated with dignity and respect. Please see **www.La-POST.org** for information regarding "what my cultural/religious heritage tells me about end of life care."

LAST NAME

FIRST NAME/MIDDLE INITIAL

DATE OF BIRTH

PATIENT'S DIAGNOSIS OF LIFE LIMITING DISEASE AND IRREVERSIBLE CONDITION:

A. CARDIOPULMONARY RESUSCITATION (CPR): PERSON HAS NO PULSE AND IS NOT BREATHING

CHECK ONE

- ☐ CPR/Attempt Resuscitation (requires full treatment in section B)
☐ DNR/Do Not Attempt Resuscitation (Allow Natural Death)

When not in cardiopulmonary arrest, follow orders in **B, C, D** and **E**.

B. MEDICAL INTERVENTIONS: PERSON HAS PULSE OR IS BREATHING

CHECK ONE

- ☐ COMFORT MEASURES ONLY: Use medication by any route, positioning, wound care and other measures to relieve pain and suffering. Use oxygen, oral suction and manual treatment of airway obstruction as needed for comfort. *Patient prefers no transfer: EMS contact medical control to determine if transport indicated.*
☐ LIMITED ADDITIONAL INTERVENTIONS: Includes care described above. Use medical treatment, IV fluids and cardiac monitor as indicated. Do not use intubations, advanced airway interventions, or mechanical ventilation. Transfer to hospital if indicated. Avoid intensive care unit if possible.
☐ FULL TREATMENT: Includes care described above. Use intubation, advanced airway interventions, mechanical ventilation. Transfer to hospital if indicated, Includes intensive care unit.

ADDITIONAL ORDERS: (e.g. dialysis, etc.)

C. ANTIBIOTICS

CHECK ONE

- ☐ No antibiotics. Use other measures to relieve symptoms.
☐ Determine use or limitation of antibiotics when infection occurs, with comfort as goal. (Benefit of treatment should outweigh burden of treatment)
☐ Use antibiotics if life can be prolonged.

☐ ADDITIONAL ORDERS:

The administration of nutrition and hydration, whether orally or by invasive means, shall always occur except in the event another condition arises, which is life-limiting or irreversible in which the nutrition or hydration becomes a greater burden than benefit to Patient.

D. ARTIFICIALLY ADMINISTERED FLUIDS AND NUTRITION: (Always offer food/fluids by mouth as tolerated)

CHECK ONE IN EACH COL.

- ☐ No artificial nutrition by tube. ☐ IV fluids (Goal :)
☐ Trial period of artificial nutrition by tube. (Goal:) ☐ No IV fluids
☐ Long-term artificial nutrition by tube. (If needed) ☐ ADDITIONAL ORDERS:

E. OTHER INSTRUCTIONS (May include additional guidelines for starting or stopping treatments in sections above or other directions not addressed elsewhere.)

F. SUMMARY

Discussed with: ☐ Patient ☐ Personal Health Care Representative

The basis for these orders is:

CHECK ALL THAT APPLY

- ☐ Patient's declaration (can be oral or nonverbal)
☐ Patient's Personal Health Care Representative (Qualified Patient without capacity)
☐ Patient's Advance Directive, if indicated, patient has completed an additional document that provides guidance for treatment measures if he/she loses medical decision-making capacity.
☐ Resuscitation would be medically non-beneficial.

PRINT PHYSICIAN'S NAME

PHYSICIAN SIGNATURE (MANDATORY)

PHONE NUMBER

PATIENT OR PERSONAL HEALTH CARE REPRESENTATIVE SIGNATURE (MANDATORY)

DATE

If Personal Health Care Representative, state relationship and authority to act on behalf of patient:

SEND FORM WITH PERSON WHENEVER TRANSFERRED OR DISCHARGED

USE OF ORIGINAL FORM IS STRONGLY ENCOURAGED. PHOTOCOPIES AND FAXES OF SIGNED LaPOST FORMS ARE LEGAL AND VALID.

DIRECTIONS FOR HEALTH CARE PROFESSIONALS

COMPLETING LaPOST

- Must be completed by a physician based on patient preferences and medical indications.
- **LaPOST** must be signed by a physician to be valid. Verbal physician orders are acceptable with follow-up signature by physician in accordance with Louisiana law.
- Use of original form is strongly encouraged. Photocopies and faxes of signed **LaPOST** are legal and valid.

USING LaPOST

- Any section of **LaPOST** not completed implies full treatment for that section.
- A semi-automatic external defibrillator (AED) should not be used on a person who has chosen "Do Not Attempt Resuscitation".
- Even if a patient chooses "no artificial nutrition by tube" or "no IV fluids" or "trial period of artificial nutrition by tube," the administration of nutrition and hydration, whether orally or by invasive means, shall always occur except in the event another condition arises which is life limiting and irreversible in which nutrition and hydration by any means becomes a greater burden than benefit to Patient.
- When comfort cannot be achieved in the current setting, the person, including someone with "comfort measures only," should be transferred to a setting able to provide comfort (e.g. pinning of a hip fracture).
- A person who chooses either "comfort measures only" or "limited additional interventions" should not be entered into a Level I trauma system.
- A parenteral (IV/Subcutaneous) medication to enhance comfort may be appropriate for a person who has chosen "Comfort Measures Only."
- Treatment of dehydration is a measure which may prolong life. A person who desires IV fluids should indicate "Limited Interventions" or "Full Treatment."
- A person with capacity or the personal representative (if the patient lacks capacity) can revoke the **LaPOST** at any time and request alternative treatment based on the known desires of the individual or, if unknown, the individual's best interests.
- Please see links on www.La-POST.org for "what my cultural/religious heritage tells me about end of life care."

The duty of medicine is to care for patients even when they cannot be cured. Physicians and their patients must evaluate the use of technology available for their personal medical situation. Moral judgments about the use of technology to maintain life must reflect the inherent dignity of human life and the purpose of medical care.

REVIEWING LaPOST

This **LaPOST** should be reviewed periodically such as when the person is transferred from one care setting or care level to another, or there is a substantial change in the person's health status. A new **LaPOST** should be completed if the patient wishes to make a substantive change to their treatment goal (e.g. reversal of prior directive). When completing a new form, the old form must be properly voided and retained in the medical chart. To void the **LaPOST** form, draw line through "Physician Orders" and write "VOID" in large letters. This should be signed and dated.

REVIEW OF THIS LaPOST FORM

REVIEW DATE AND TIME	REVIEWER	LOCATION OF REVIEW	REVIEW OUTCOME
			☐ No Change ☐ Form Voided and New Form Completed
			☐ No Change ☐ Form Voided and New Form Completed
			☐ No Change ☐ Form Voided and New Form Completed
			☐ No Change ☐ Form Voided and New Form Completed
			☐ No Change ☐ Form Voided and New Form Completed
			☐ No Change ☐ Form Voided and New Form Completed

SEND FORM WITH PERSON WHENEVER TRANSFERRED OR DISCHARGED

USE OF ORIGINAL FORM IS STRONGLY ENCOURAGED. PHOTOCOPIES AND FAXES OF SIGNED LaPOST FORMS ARE LEGAL AND VALID.

CHAPTER 11

FORM 6: DECLARATION ON FINAL WISHES

FORM 6 LETS ORDERS BE GIVEN AND PERSON NAMED TO CONTROL BODY

Form 6 lets a person name someone and give orders to control issues involving their body after death, like funeral, cremation, ceremonies, and what goods and services related to these to buy.

FORM CAN NAME PERSON TO CONTROL BODY RATHER THAN CLOSE FAMILY

In Louisiana the person who controls a dead body and what happens to it is normally any surviving spouse, then adult children of deceased, and then more distant family. But in a writing a person can say who should control these issues, like a friend or distant family member. This may be done if what closest family will do with the body is not wanted, or to save closest family the burden of handling these matters and instead giving this job to a friend or other family.

CAN GIVE INSTRUCTIONS IN FORM BUT MOST SKIP THIS

In the form besides the spot to name the person in charge, also there is space to give orders people must follow (like locations to use, funeral and graveside and other ceremonies, or items wanted like caskets or tombstones). But most people skip giving written orders which is recommended, and just trust the person in charge follow the wishes verbally told to them or just choose wisely. Some people write to say they want things simple, like, “I want an affordable funeral and burial and agree to whatever my agent decides” or “A plain wood box is fine”.

DO FORM BY PERSON SIGNING BEFORE NOTARY

To be valid the Declaration on Final Wishes form must be filled out and then signed by a person before a notary. It should be kept where it will be quickly found within a day or two of death. It can also be left with the named agent to use when needed. To cancel the form a person can just tell their agent and others it is cancelled, or can tear up the form and make sure the agent and anyone who saw the old form know about this.

FORM 6:
DECLARATION ON FINAL WISHES

DECLARATION ON FINAL WISHES

(Louisiana Revised Statutes § 37:876 and other laws)

I, _____
_____ (name and address)
being of sound mind hereby voluntarily make this declaration and say on my death the
disposition of my bodily remains and all related issues shall be controlled by
_____ (name of agent) as my agent and
as person declared to control this. Such person shall make all decisions concerning
funeral, cremation, burial, ceremonies involving my body, use and purchase of goods and
services involving my body, and all related things. I do hereby authorize and empower
any funeral director, funeral establishment, crematory authority, or any other place or
party to accept this notarized declaration as authority including or for cremation of my
remains if my agent shall later so request this.

I am not required to but may state certain wishes as follows:

Signed this _____ day of _____, 20____.

Signature: _____

NOTARIZATION

STATE OF LOUISIANA, PARISH OF _____

I, _____ a Notary Public in and for the State and Parish
aforesaid, do hereby certify that _____ who personally
came and appeared before me as the declarant and principal, and executed the foregoing
Declaration on Final Wishes in said State and Parish, and acknowledged said document
and execution to be his or her voluntary act.

Witness my signature this _____ day of _____, 20____.

Notary Public: _____

CHAPTER 12

FORM 7: GENERAL DURABLE POWER OF ATTORNEY

FORM 7 IS “DURABLE GENERAL POWER OF ATTORNEY” FORM

Form 7 is a Durable General Power of Attorney form that lets a person give power to another to act for them, like power to sell things, make transfers from accounts, or access information.

FORM LETS PERSON SHARE POWER WITH AGENT IN “GENERAL” AREAS

A Power of Attorney form lets a person share during life what powers they (as “Principal”) want to share with trusted person, like spouse, son, or friend (called “Agent” or “Attorney-in-Fact”). This is done in case a person may later be sick, tired, or just busy and need help doing things, like paying for things, handling paperwork, or selling things. This form may avoid need for serious steps like a guardianship or nursing home. If full power is given it is called a “General” Power of Attorney.” But sometimes a few powers are not given, for example this book’s form does not give full power to make health care decisions. Note, Louisiana law basically requires a form say what powers are given, so usually these forms are long and wordy. Except for military personnel there is no standard Power of Attorney form to use. Be warned, some financial institutions have their own form they insist be used, so it may help to ask about this. Also be warned this area of law is complex and has limitations, so consulting a lawyer is advised if using a Power of Attorney.

POWER OF ATTORNEY USUALLY “DURABLE” SO LASTS EVEN IF ILL

Usually a Power of Attorney form is written so it is “Durable” so continues to have effect even if a person becomes unconscious or similarly incapacitated, which can be very helpful. But a Power of Attorney form has no effect once a person is dead. Note, some lawyers write “Springing Power of Attorney” forms triggered by an event like illness but this can cause problems.

DO FORM BEFORE 2 WITNESSES AND A NOTARY PUBLIC

Under Louisiana law for a Power of Attorney form to cover all kinds of property and certain major issues the form must be signed with 2 witnesses and notary public. The persons who are witnesses should not be the named agent, and not usually close family like a spouse or children. Once signed a Power of Attorney form can be kept just in case, but to be used it must be given out before a person becomes incapacitated. Note, this book’s form has an optional “Acceptance” page for the named agent to make clear they accept power, but legally this is optional and often skipped.

FORM 7:
DURABLE GENERAL POWER OF ATTORNEY

STATE OF LOUISIANA
PARISH OF _____

DURABLE GENERAL POWER OF ATTORNEY

BE IT KNOWN, on the date indicated below, in the presence of the undersigned competent witnesses and notary public, that there PERSONALLY CAME AND APPEARED

_____, a person of the full age of majority and a resident of the State of Louisiana, hereinafter referred to as "Principal" or appearer, whose mailing address is _____,

who declared that Principal has made and appointed, and does ordain, authorize, constitute make _____, as "Agent" and to be attorney-in-fact for Principal, both general and specific, with full power and authority to act for, in the name of and on behalf of Principal, to do all acts necessary or deemed by Agent to be appropriate for Principal including but not limited to the following:

1. **GENERAL BUSINESS AFFAIRS AND BANKING.** To conduct, manage and transact the business and personal financial matters of Principal, of every nature and kind with no exception.

2. **BANKS AND LOANS.** To make and endorse and to accept and to pay promissory notes, drafts and bills of exchange; to sign checks drawn on and to draw money out of any bank, homestead or other financial institution or other account whatsoever in which funds may be on deposit in the name of or for the account of Principal; to deposit checks, drafts and bills of exchange in any account standing in the name of Principal; and to deliver to any bank or other financial institution any promissory notes or other instruments for collection. To open, manage, operate, renew, or close any account at any bank or financial institution in the name of Principal; to deposit funds therein or withdraw all or part thereof; including certificates of deposit, checking, savings, money market or any other type of account or any Treasury notes or bills; the foregoing being illustrative and without limit of generality of this power.

3. **INVESTMENTS AND SECURITIES.** To sell, purchase and transfer shares of stock, bonds, or any other securities of any corporation or any other legal entity, whether private or public and whether registered in the name of Principal or not, and to receive and receipt for the sale price thereof; to receive and receipt for all dividends, coupons or other distributions due or to become due thereon; and to deliver, pledge and pawn said shares of stock or bonds. To attend meetings of the stockholders of any corporation or holders of any securities of any legal entity in which Principal may be interested and to vote in the name of Principal on all questions and matters that may be submitted or considered at such meeting. To receive all documents and notices and to exercise all rights and to fulfill all obligations of Principal regarding any security of any type, value or nature.

4. **BORROWING OR LENDING OUT.** To borrow money in Principal's name from any bank or other financial institution; to make, issue and endorse any promissory note in the name of Principal, to renew the same from time to time; to deliver, pledge and pawn the same; and to waive and renounce any prescription accrued thereon. Also my agent may make loans of property to any person, entity, or other party for such purposes and for such periods, in such amounts and at such rates of interest, with or without security, and subject to such other terms as my Agent may determine.

5. **PURCHASE AND SALE AND OPTIONS.** To purchase, sell, exchange, partition or otherwise acquire and dispose of any property, at public or private sale for such purposes and upon such terms, including sales on credit, with or without security in such manner, and at such prices as my Agent may determine. My Agent may purchase U.S. Government bonds redeemable at par in payment of federal estate taxes. My agent may grant options affecting any property or other for such purposes and periods, upon such conditions, in such manner, and at such prices as my Agent may determine; to exercise them for such price and on such terms and conditions as my Agent may see fit.

6. **PROPERTY OF ALL TYPES.** To sell, mortgage, encumber, pledge, purchase, lease, or grant servitudes pertaining to immovable (real) or movable (personal) property, although not described herein as permitted by Louisiana Civil Code Article 2997 on such terms and conditions as determined by Agent and to execute such documents to effect such acts and receive or pay amounts pursuant to such acts. To exchange property or any other thing for any other property or other thing or to give options to exchange on such terms as my Agent may deem advisable. In any property, my Agent may create servitudes or easements on property for such purposes and periods, upon such conditions, in such manner, and at such price as my Agent may determine. My agent may exchange property for other property or to give options to exchange property upon terms my Agent finds proper. My Agent may hold and retain anything for as long as Agent deems advisable, in any location, even if not appearing suitable or worthwhile, and may hold securities or any other things in the names of nominees.

7. **LEASES.** To lease or give options to lease all or any part of property for such price, and on such terms and conditions, for such purposes and at such rentals as my Agent may see fit; to enter into, amend or extend all kinds of leases including but not limited to all kinds of leases, surface leases, and oil, gas and mineral leases, with or without pooling provisions.

8. **FUELS, MINERALS AND RELATED RIGHTS.** To execute mineral leases and other contracts, including unitization and pooling agreements, for the exploration and development of oil, gas, salt, and any minerals in and under any property of Principal or in which Principal may have an interest, on such terms and conditions and for such consideration as Agent may deem proper, and to receive and receipt for the bonuses, rents and proceeds thereof; to execute mineral and property deeds or leases either selling, buying or leasing mineral or royalty rights; and to execute all division orders or other agreements of every nature and kind whatsoever in connection with or relative to said acts.

9. **LEGAL ACTIONS.** To appear before all courts and to prosecute, defend, or compromise and settle by agreement, arbitration, or otherwise; to accept service of process on behalf of Principal; to sign all pleadings and do all things necessary; to obtain writs of attachment, sequestration and injunction; and to take appeals and, in any such instances, to furnish and sign on behalf of Principal the requisite security and bonds. My Agent may attend and take any action at meetings of creditors and vote in Principal's name on all questions and matters that may be submitted to or considered at such meeting, including for any kind of bankruptcy and /or any kind of entity. My Agent may institute, supervise, prosecute, defend, intervene in, abandon, compromise, arbitrate, settle, dismiss, and appeal from any and all judicial or administrative proceedings, actions, suits, hearings, attachments, or sequestrations involving me in any way, including claims by or against me arising out of property damages or personal injuries suffered by or caused by me or under circumstances causing the loss to be borne by me.

10. **PROBATE AND SUCCESSIONS.** To act for and represent Principal judicially and otherwise, whether as heir, legatee, creditor, executor, administrator or otherwise, in all probate actions, successions, and estates in which Principal is, may be or may become interested, including any acceptance or renunciation thereof; to apply for the administration thereof and to demand, obtain and execute all orders, decrees and tax returns as Agent may deem proper; and to settle, compromise and liquidate Principal's interest therein and to receive and receipt for all property and effects to which Principal may be entitled in respect of said successions or estates.

11. **ACTS FOR OTHERS.** To act for Principal where Principal has been or may be appointed the agent of others; and to vote proxies of others issued in the name of Principal and to execute proxies in favor of others issued in the name of Principal and to execute proxies in favor of others to vote.

12. **LEGAL AND OTHER CLAIMS.** To demand and obtain and to recover and receipt for anything including money, property and effects to which Principal is now or may be hereafter entitled, and to that end to compromise and adjust all accounts and other obligations and to give good and sufficient discharge and acquittance therefor.

13. **GIFTS AND DONATIONS.** To give, donate, or transfer without consideration any asset of

Principal to any person as determined by Agent.

14. **TAX FILINGS AND REPRESENTATIONS AND POWER TO ACT ON TAXES.** To file any United States, State of Louisiana or other tax returns (including but not limited to income tax returns); to apply for extensions of time to file tax returns; to file elections related to tax matters; to represent the Principal in connection with any matter relating to any taxes, to grant powers of attorney to any authorized representative and to take any action relating to any taxes, including but not limited to taxes of the United States and the State of Louisiana. To exercise any elections I may have under federal, state or local tax law; and generally to represent me or obtain professional representation for me in all tax matters and proceedings of all kinds and for any period before any taxing authority. To engage, compensate and discharge attorneys, accountants and other tax and financial advisors and consultants to represent or assist me in connection with any tax matter involving or in any way related to me or any property in which I have or may have any interest or responsibility.

15. **INSURANCE.** To exercise any right, option or privilege available to Principal regarding any policy of insurance of any type, including life insurance or annuities, and including but not limited to the right to surrender the policy, make a policy loan, change the beneficiary, make a claim, receive payment on any claim, elect settlement or disbursement options, receive any check or draft, and endorse, collect and receive the proceeds of same.

16. **OPERATION OF BUSINESS.** To start or continue to operate or participate in the operation of any of my business interests, so long as my Agent may deem it advisable, to change the nature of the business, or enlarge or diminish the scope of its activities, to dissolve or liquidate it, or to participate in any incorporation, change merger, consolidation, reorganization, dissolution or liquidation. To participate in any plan of liquidation, reorganization, consolidation or merger involving any company or companies whose stock or other securities may be subjected to any plan of reorganization or with any protective committee and to delegate to such committee discretionary powers with relation thereto and to pay a proportionate part of the expenses of such committee and any such assessments levied under such plan; to accept and retain new securities received by my Agent pursuant to any such plan; to exercise all conversion, subscription, voting and other rights of whatsoever nature pertaining to such property; and to pay any amount or amount of money my Agent may deem advisable. Similarly, my Agent may start or continue to be a partner in such partnerships as my Agent may see fit, whether as a limited or general partner, or partner of any type, and to continue me or my Agent as a partner in any partnership in which I may be a partner or possessed of the right to become a partner, and to consent to the continuation of any partnership that might otherwise terminate even though the articles of partnership may not provide for continuation. Also, my Agent may attend and take any action at meetings of creditors and vote in Principal's name on all questions and matters that may be submitted to or considered at such meeting, including for any kind of bankruptcy and /or kind of entity.

17. **IMPROVEMENT AND BUILDING.** To raise any buildings or other structures as my Agent may consider expedient; to improve or develop immovable property; to erect, alter, or repair any buildings or other structures and to make any other kind of improvements my Agent may deem proper, to received, accept, hold, use, control, administer, build upon, manage or otherwise improve, repair, divide or subdivide all or any Property in the manner and to the extent my Agent may deem advisable.

18. **EMPLOYEES, CONTRACTORS AND AGENTS.** To employ or retain such employees, agents and advisors as my Agent may deem necessary, to assist in performing any duties of my Agent, including but not limited to legal advice and work including attorneys, accountants, other professionals, investment advice, management advice, and for any other purposes my Agent considers advisable, and to determine reasonable charges for such services and to make payment.

19. **MUTUAL FUNDS AND LIFE INSURANCE.** To acquire and retain for so long a period as my Agent may see fit the shares, preferred or common, of investment companies, or investment trusts, whether of the open-end or closed-end type, and without notice to anyone, to participate in any common

trust fund or pooled investment fund. Also, my Agent may insure the life of any other person on whose life I may have an insurable interest. Life insurance shall be in such amounts as my Agent may determine, and in such forms, as my Agent may deem wise by term insurance, ordinary life insurance, stated period payment insurance, endowment insurance or any other kind of life insurance. Proceeds of life insurance shall be made payable to any beneficiary or contingent beneficiary designated by my Agent. My Agent may elect any option provided by any policy. My Agent may surrender any of such policies at any time and obtain the cash surrender value, or may borrow against such value, or may exercise any other right of an owner of the policy.

20. **POWER OF ATTORNEY.** To give such powers of attorney, general or special, with or without power of substitution, in connection with exercise of other powers as my Agent finds proper.

21. **CONTRACTS.** My Agent may enter into any and all kinds of contracts and agreements on my behalf, whether or not specifically described herein.

22. **PENSIONS AND RETIREMENT ACCOUNTS.** To create and contribute to an Individual Retirement Account (IRA) or employee benefit plan (including self-employed plans) for my benefit; to select payment options under plans in which I participate, and to change options I have selected. To make and change beneficiary designations, to make voluntary contributions, to "roll-over" plan benefits into other retirement plans, and to borrow money and purchase assets from plans and to see assets thereof, if authorized by any such plan.

23. **ACCOUNTS AND SAFE-DEPOSIT BOXES.** To establish accounts of all kinds, (including checking and savings) for me with financial institutions, including banks, thrift institutions, brokerage firms, and credit unions. To modify, terminate make deposits to and write checks on or make withdrawals from and grant security interests in all accounts in my name or upon which I or my Agent are authorized signatories (except accounts held by me in a fiduciary capacity), whether such account was established by me or for me by my Agent. To negotiate, endorse or transfer any checks or other instruments with respect to any account; to contract for any services rendered by any bank or other institution. Also my Agent may contract with any institution for a safe-deposit box in my name, or to have access to all safe-deposit boxes in my name or to which I am an authorized signatory, and may add to and remove from the contents of any safe deposit box and to terminate contracts for such.

24. **TRUSTS.** My Agent may execute trust instruments on my behalf as settlor or co-settlor, whether or not I am a beneficiary. To make gifts in trust on my behalf to trusts created by my Agent or to others trusts. To provide that a trust shall be revocable or irrevocable, and interests in the trust spendthrift or freely alienable. To serve as trustee of any other trust created by or for my benefit. To add any trust on my behalf. To withdraw or receive the income or principal and to request or demand such withdrawals of any trust.

25. **ACTIONS INVOLVING FIDUCIARY OFFICES.** To renounce any fiduciary office to which I may be appointed or elected, including (but not limited to) executor, administrator, personal, representative, trustee, tutor, curator, guardian, attorney-in-fact, or officer or director of a corporation. to render such accountings of my activities as may be required.

26. **SUPPORT OF PERSONS.** To continue to support any person I have undertaken to support or to whom I may owe an obligation of support. Support may include payment of real property taxes, payments on loans secured by my residence, maintenance of my residence, food, clothing and shelter, medical, dental and psychiatric care, normal vacations and travel expenses; education, (including education at vocational and trade schools, training in music, stage, arts and sports, special training provided at institutions for the mentally or physically handicapped, preparatory, undergraduate and graduate or professional study in any field at public or private universities, colleges or other institutions of higher learning) including payments for tuition, books and incidental charges made by the educational institutions, travel costs to and from such institutions, room and board, and spending money. If I have been legally separated or divorced from my spouse, any support provided to such

spouse by my Agent shall be limited to such support as may be required by law.

27. **MY LIVING EXPENSES AND CARE.** My Agent may provide for my continued and further maintenance and support, of any type and nature, including my housing, food, insurance, transportation, servants, or other, whether such are existing or are new additions. My Agent may contract for institutional health care (hospital, retirement, facility, nursing home, hospice or other) on my behalf. My Agent may sell, exchange, lease, sublease or dispose of my home and such of its contents as are no longer useful to me and are not specifically bequeathed in my will, all on such terms as to price, payment and security as my Agent deems reasonable.

28. **FUNERAL AND BURIAL.** Arrange and contract for my funeral including appropriate arrangements and instructions for my funeral service or memorial service, including purchase of a burial plot or other appropriate disposition of my body. My Agent shall comply with such known written instructions as I may have or leave.

29. **FULL ACCESS TO RECORDS AND INFORMATION.** My Agent is given full access and right to all document, records, and information which relates in any way to me or my affairs, whether personal or business, including health care, and no matter how private or confidential. Persons who get requests for information from my Agent are authorized to furnish it, as and when requested. I release them from any and all legal liability for furnishing the information my Agent requests. If that information is privileged, I waive the privilege. My Agent may disclose any information to such others as my Agent may deem appropriate. My Agent may request, receive, take from US Mail, open, read, respond to and redirect any written communications directed to me. My Agent may have access to any medical information in any form regarding my physical or mental condition, and to execute such consents as may be related. My Agent may receive and open all letters, telegrams, cablegrams, emails, files and databases I have or have any right to access, and any other thing addressed to me and to answer any such in principal's name.

30. **SUBSTITUTE AGENT AND ATTORNEY-IN-FACT.** Principal hereby grants the Agent in office the power to appoint or remove a substitute Agent and attorney-in-fact, including any co-Agent or similar which the Principal may name or appoint. My there is no Agent or attorney-in-fact acting under this document due to their unavailability including illness or death, any Court may appoint or name a person to act as Agent.

31. **GENERAL.** My Agent, in addition to all other powers and grants, may also do and perform each and every other act, matter or thing whatsoever as may be appropriate in Agent's discretion as if such act, matter or thing were or had been particularly stated herein. With regard to any property or other interest of mine, or any action my agent may wish to do, my Agent is given and shall have all of the powers that may be conferred upon agents under applicable law. If a question shall arise as to whether Agent has a particular power, this agency shall be liberally construed as granting such power. Should future changes in the law expand powers of agents, my Agent shall get those expanded powers. The Agent is authorized generally to do and perform all and every act, matter and thing whatsoever, as shall or may be requisite and necessary or helpful to the things described above, and the Agent may act and do things just as Principal could or might do if personally present, and Principal hereby ratifies and confirms all the Agent may lawfully do or cause to be done by virtue of this Power of Attorney.

LIABILITY AND RELEASE OF AGENT. My Agent shall be liable only for breach of duty to Principal committed in bad faith with willful misconduct or gross negligence. Principal shall indemnify Agent and hold Agent harmless for all reasonable costs, fees and expenses regarding all matters hereunder, legal actions brought by or against the Agent for which Agent is not liable. I release and discharge my Agent and my Agent's heirs, successors and assigns from any and all liability to me, my heirs, successors and assigns arising out of any acts or omissions of my Agent, except for willful misconduct or gross negligence. My Agent shall have no responsibility to make my property productive

of income, to increase the value of my estate or to diversify my investments.

RELIANCE BY OTHERS. This power of attorney may be filed and recorded with the Clerk of Court for any Parish and registered in the conveyance records, and shall remain in effect as to third persons dealing with the agent until either such power or substitute power of attorney is revoked by notarial act and recorded as set forth above, and/or the third person receives actual notice of revocation. If any party who relies on this Power of Attorney delivers written notice to the Principal, this Power of Attorney shall remain in effect until such party receives written notice to the Principal, this Power of Attorney shall remain in effect until such party receives written notice of revocation, notwithstanding recordation of revocation as stated above.

AGENT'S REIMBURSEMENT AND COMPENSATION. My Agent shall be entitled to reimbursement for costs and expenses reasonably incurred on my behalf, and also shall be entitled to reasonable compensation for my Agent's work which my Agent may withdraw or pay without any court action, any notice, or any other thing.

THIS DOCUMENT AND POWER OF ATTORNEY EFFECTIVE IMMEDIATELY. This document and power of attorney is effective immediately, and the effect of such and all power and authority stated and given herein shall arise and be given immediately when this document is executed without need for any event or trigger including any change in health or absence. No lapse or passage of time, or inaction, will cancel or void or end this document and it is perpetual until revoked.

DURABILITY. This document and power-of-attorney and agency is "durable" and shall not be deemed revoked by my disability or incapacity or similar. It is expressly said any procuration or act of procuration and also any mandate or power or position related to such shall expire or lapse in the event of any incapacity, disability, or similar. No lapse or passage of time, or inaction, will cancel or void or end this document and Power of Attorney which is perpetual until revoked.

EXECUTION

THUS DONE AND PASSED in _____ Parish, Louisiana, by the principal making and signing this document below before the undersigned competent witnesses who sign below and before me the below notary public , on _____, 20____.

Signature of Principal: _____ Print Name: _____

Signature of Witness: _____ Print Name: _____

Signature of Witness: _____ Print Name: _____

NOTARY PUBLIC

NOTARY PUBLIC, PARISH OF _____, STATE OF LOUISIANA

MY COMMISSION EXPIRES ON : _____

NOTARY NUMBER: _____

STATE OF LOUISIANA

PARRISH OF _____

**ACCEPTANCE BY AGENT OF POWER OF ATTORNEY
(optional to do later)**

BEFORE ME, Notary Public, duly commissioned and qualified, in and for the Parish and State aforesaid, and in the presence of the named and undersigned competent witnesses there PERSONALLY CAME AND APPEARED _____ who hereby accepts the appointment created by this Power of Attorney to act as Principal's true and lawful agent and attorney-in-fact.

THUS DONE AND PASSED, in the Parish of _____, State of Louisiana, before the undersigned competent witnesses and me, Notary Public, this the _____ day of _____, 20____.

Signature of Agent and Attorney-in-Fact: _____

Print Name: _____

Signature of Witness: _____

Print Name: _____

Signature of Witness: _____

Print Name: _____

NOTARY PUBLIC

PARISH OF _____, STATE OF LOUISIANA

MY COMMISSION EXPIRES ON: _____

NOTARY NUMBER: _____

APPENDIX A: **HOW TO DOWNLOAD LEGAL FORMS**

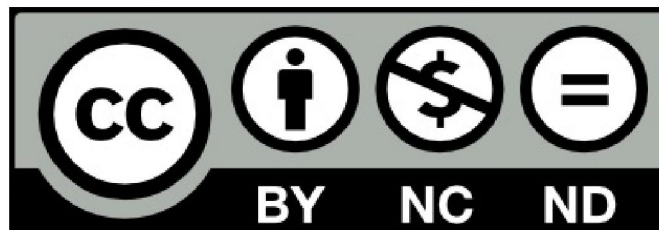
**TO GET BOOKS AND FORMS GO TO
WWW.DAVENPORTPUBLISHING.COM.**

**MOST PEOPLE PRINT OUT A PDF FILE AND
WITH PEN OR MARKER ENTER INFORMATION
BY HAND. BUT COMPLETING DOCUMENTS
OTHER WAYS IS LEGALLY PROPER.**

PERMISSION TO COPY AND USE BOOKS FOR FREE

To help people and groups publisher and authors of the book allow mostly free use by giving all a "Creative Commons Attribution-NonCommercial-NoDerivatives 4.0 International License". Most users face no limit on copying, using, holding in library to loan out, or giving out copies.

Basically, as the image below says, any copying or use is OK if it still shows it is by the authors, is non-commercial (nc) with no price charged, and has no derivatives (nd) so no big changes.



(This work licensed under a Creative Commons Attribution-NonCommercial-NoDerivatives 4.0 International License.)

EMAIL ANY QUESTIONS TO DAVENPORTPRESS@GMAIL.COM.

APPENDIX B:

SAMPLE FILLED OUT FORMS

ON THE FOLLOWING PAGES ARE SOME SAMPLE FILLED OUT LEGAL FORMS.

TO GET FORMS TO USE PEOPLE CAN:

- (1) PHOTOCOPY BOOK PAGES,
- (2) TEAR OUT PAGES FROM A BOOK, OR
- (3) DOWNLOAD BOOK WITH FORMS FROM WWW.DAVENPORTPUBLISHING.COM
AND USUALLY PDF FORM AT IS BEST TO AVOID SPACING/FORMAT CHANGES.

On the next pages to show how it can be done are some sample filled out legal forms.

People can add words to legal forms by computer or typewriter to be neater, but many people just by hand use pen, marker, or pencil to handwrite words into forms.

It is not required but is bit better if signatures are in ink or marker not pencil.

Many parts of the forms especially Will gifts can be left empty and unfilled.

Anyone can fill in words in legal form not just the person doing the form, like a friend with neat writing can fill in all the words, addresses, and dates that are needed.
Only the final signatures must be done by each person who wants the form.

To add words in form by pen, pencil, typewriter, or computer any of these is fine:

"I appoint John Doe as Agent" ,
"I appoint John Doe as Agent",
"I appoint John Doe as Agent".

When doing forms it may help to know "respectively" means "in order just stated".

People need not worry about neatness or small mistakes, and a document is usually fine if those people who knew a person during their life can tell the likely meaning.

**SAMPLE FILLED OUT
FORM 1:
LAST WILL AND TESTAMENT (SPOUSE)**

LAST WILL AND TESTAMENT

I, who am named John David Maxwell , being of sound mind and body and wishing to make proper disposition of my property and do other things in event of death, make this my Last Will and Testament, revoking all prior Wills and Codicils.

GIFT OF ALL TO ANY SURVIVING SPOUSE

If at my death my spouse is still living, then I leave and give to my spouse the balance of my estate and the residue of my property of which I die possessed, both real and personal. I may have informed my spouse about certain wishes for my property and money including by writing them below, which wishes my spouse is not required to but may choose to carry out.

GIFTS OF PARTICULAR PROPERTY OR AMOUNTS OF MONEY

Except as otherwise provided above, I leave and give particular property or amounts of money as separate gifts as follows (spaces may be left blank if not needed):

antique oak tables and chairs to Anne Janet Lynn-Hutchinson ;

63 Ivy Rd., Rox, Louisiana, including land, buildings, and fixtures to Greta Grant ;

Bronze Roman Lamp to Anne Janet Lynn-Hutchinson ;

\$7,281.35 to Wanda Kay Zinski ;

Irish engraved ring and 1.5 carat diamond ring to Harriet Rush Smith ;

all jewelry not given above to Hannah Eve Pidoski ;

UBank account ending #8923 to John Kent my cousin ;

1998 Ford truck to John Hatcher my cousin ;

_____ to _____.

Signature on each page: **John David Maxwell**

GIFT OF RESIDUE

Except as otherwise provided above, I leave and give the balance of my estate and the residue of my property of which I die possessed, both real and personal, to Greg Maxwell my brother, Jane Porter my sister, and Eddie Kinkaid my friend. If I have named multiple persons if any are deceased then others named who survive take their share, except if any deceased person is my child or sibling (or a descendant of them) then their share shall go to their descendants by roots who exist at my death.

EXECUTOR

I name and appoint Mary Jennifer Maxwell my wife as executor for me and of my estate with full seizin. My executor including any successor executor shall serve without bond or requirement they give any bond or surety. My executor including any successor executor is expressly given authority to act as independent executor without court supervision in as informal a manner as possible, and is expressly given the right to own or acquire property with any heirs or other beneficiaries or trusts and to do any action to the maximum extent allowed by law.

MINORS

If I am survived by minor children whose other parent predeceased me or is reasonably unavailable, I name and appoint as tutor of the person and also tutor of the property of them Betty Lou Smith my sister (this space may be blank if not needed).

OTHER PROVISIONS

In this document any reference to ending of words that indicate a particular gender or number should be disregarded, and any such usage is not meant to limit or imply anything, including testator also may refer to a testatrix and tutor to a tutrix.

Signature on each page: *John David Maxwell*

Any property which would go to any minor may be delivered to the person who is a parent or the tutor of such minor.

All donations or gifts inter vivos I made to my children during my life are intended as extra portions, and collation and them paying back must not be required.

Gifts in this Will of the same type are made and should be carried out in the order written by any executor or court including if there is not enough to make all gifts.

Any gift going to more than one person may be sold including by any executor or court if they think recipients do not agree on how to use the gifted property.

SIGNATURE OF TESTATOR MAKING WILL

In presence of the undersigned notary and two competent witnesses, after due presentation and declaration by me that this is my Last Will and Testament, I have signed this document as Testator at the end and on each page, on the date immediately below.

Date: June 22, 2017 Signature: John David Maxwell

WITNESSES

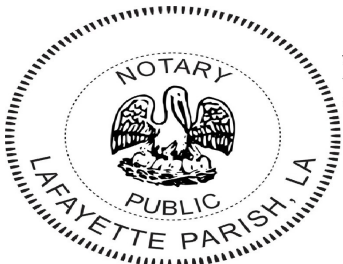
In our presence the testator has declared or signified that this instrument is his or her testament and has signed it at the end of each other separate page, and in the presence of the testator and each other we have hereunto subscribed our names this 22 day of June, 20 17.

Amy Janet Windsor
Signature of witness 1

Brian Adam Smith
Signature of witness 2

John David Maxwell
Signature of Testator Making Will

Nathan Offat
Notary Public



**SAMPLE FILLED OUT
FORM 2:
LAST WILL AND TESTAMENT (STANDARD)**

LAST WILL AND TESTAMENT

I, who am named David Roger Widowonski , being of sound mind and body and wishing to make proper disposition of my property and do other things in event of death, make this my Last Will and Testament, revoking all prior Wills and Codicils.

GIFTS OF PARTICULAR PROPERTY OR AMOUNTS OF MONEY

I leave and give particular property or amounts of money as separate gifts as follows (spaces may be left blank if not needed):

a total of \$50,000 to Brian Oscar Peterson, Michael Paul Peterson, Mary Hart, Tom Jackson, and Beverly Wannawaker ;

a total of \$6,000 to Beth Tina Smith and Frank M. Smith ;

\$5,000 to Loretta Switt in the hope she will help her daughter Megan Switt ;

\$3,000 to Loretta Marsha Switt ;

Wells Fargo savings account ending in #8923 to Lawrence Deer ;

\$1,000 to American Red Cross charity ;

\$5,000 to Fishy Smith my fishing buddy ;

all cars and trucks I own at my death to Victor Perez my mechanic ;

\$7,002.21 to Brenda Mary Hill ;

\$5,000 to be shared equally by David Shore, Adam Lannamaker, Karen Boulder, and Jane Boulder ;

my blue deep-sea fishing rod to John Running Bear ;

Signature on each page: **David Roger Widowonski**

\$1,000 to Louisiana PetProtectors charity located in Baton Rouge ;

\$500 to Arnold Amholder my neighbor ;

\$2,000 to Harry Nixon ;

all tools and woodworking equipment to Victor Woodhold ;

GIFT OF RESIDUE

Except as otherwise provided above, I leave and give the balance of my estate and the residue of my property of which I die possessed, both real and personal, to 20% to Hector S. Widowonski, 30% to Ken Baker, and 50% to Kim Tina Maxwell .

If I have named multiple persons if any are deceased then others named who survive take their share, except if any deceased person is my child or sibling (or a descendant of them) then their share shall go to their descendants by roots who exist at my death.

EXECUTOR

I name and appoint Ken Baker as executor for me and of my estate with full seizin. My executor including any successor executor shall serve without bond or requirement they give any bond or surety. My executor including any successor executor is expressly given authority to act as independent executor without court supervision in as informal a manner as possible, and is expressly given the right to own or acquire property with any heirs or other beneficiaries or trusts and to do any action to the maximum extent allowed by law.

Signature on each page: **David Roger Widowonski**

MINORS

If I am survived by minor children whose other parent predeceased me or is reasonably unavailable, I name and appoint as tutor of the person and also tutor of the property of them _____ (this space may be blank if not needed).

OTHER PROVISIONS

In this document any reference to ending of words that indicate a particular gender or number should be disregarded, and any such usage is not meant to limit or imply anything, including testator also may refer to a testatrix and tutor to a tutrix.

Any property which would go to any minor may be delivered to the person who is a parent or the tutor of such minor.

All donations or gifts inter vivos I made to my children during my life are intended as extra portions, and collation and them paying back must not be required.

Gifts in this Will of the same type are made and should be carried out in the order written by any executor or court including if there is not enough to make all gifts.

Any gift going to more than one person may be sold including by any executor or court if they think recipients do not agree on how to use the gifted property.

Signature on each page: **David Roger Widowonski**

SIGNATURE OF TESTATOR MAKING WILL

In presence of the undersigned notary and two competent witnesses, after due presentation and declaration by me that this is my Last Will and Testament, I have signed this document as Testator at the end and on each page, on the date immediately below.

Date: March 3, 2015

Signature: *David Roger Widowsonki*

WITNESSES

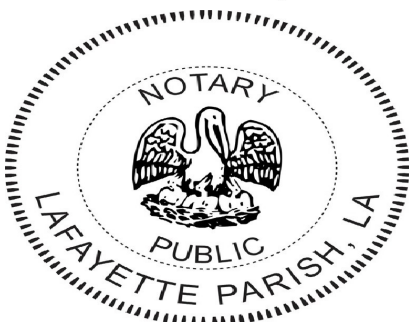
In our presence the testator has declared or signified that this instrument is his or her testament and has signed it at the end of each other separate page, and in the presence of the testator and each other we have hereunto subscribed our names this 3rd day of March, 20 15.

Michael Frank Bjerk
Signature of witness 1

Brian Douglas Thorpe
Signature of witness 2

David Roger Widowsonki
Signature of Testator Making Will

Mary Wattanake
Notary Public



**SAMPLE FILLED OUT
FORM 3:
LOUISIANA HEALTH CARE POWER OF ATTORNEY**

LOUISIANA HEALTH CARE POWER OF ATTORNEY

1. I, **Ruth May Kent**, hereby appoint:

Amy Olivia Kent (my daughter)

Name

318-555-1234

Home Telephone Number

33 Main Street, #4

Home Address

Work Telephone Number

Bossier City, LA

City, State

318-555-1234

Cell Telephone Number

as my agent to make health-care decisions for me if I become unable to make my own health care decisions such as the following:

☐ A. Grant, refuse, or withdraw consent on my behalf for any health care service, treatment or procedure, even though my death may ensue.

■ B. Talk to health care personnel, get information, have access to medical records and sign forms necessary to carry out these decisions.

☐ C. Authorize my admission to or discharge from any hospital, nursing home, residential care, assisted living or similar facility or service.

☐ D. Contract on my behalf for any health-care related services or facility (without my agent incurring personal financial liability for such contracts) such as surgery, medical expenses and prescriptions.

E. Make decisions regarding surgery, medical expenses and prescriptions.

2. If the person named as my agent is not available or is unable to act as my agent, I appoint the following person(s) to serve in the order listed below:

A.

Beverly Dottie Garcia (my daughter)

Name

Home Telephone Number

777 Broadway Avenue

Home Address

318-555-0022

Work Telephone Number

Shreveport, LA

City, State

612-555-9777

Cell Telephone Number

B.

Name

Home Telephone Number

Home Address

Work Telephone Number

City, State

Cell Telephone Number

3. With this document, I intend to create a durable power of attorney for health care, which shall take effect upon and only during any period in which, in the opinion of my attending physician, I am unable to make or communicate a choice regarding a particular health-care decision. My agent shall make health-care decisions as I direct below or as I make known to him/her in some other way. If my agent is unable to determine the choice I would want to make, then my agent shall make a choice for me based upon what my agent believes to be in my best interest.

4. With this document, I authorize any person, organization, or entity involved with my health care to disclose and release to my agent any and all of my individually identifiable health information and medical records in accordance with HIPAA.

5. SPECIAL PROVISIONS AND LIMITATIONS. I do NOT want the following treatments:

6. To the extent that I am permitted by law to do so, I herewith nominate my agent to serve as the curator of my person, and/or in any similar representative capacity. If I am not permitted by law to make a nomination, then I request in the strongest possible terms that any court consider this nomination.

7. No person who relies in good faith upon representations by my agent or alternate agent shall be liable to me, my estate, my heirs or assigns for recognizing the agent's authority.

8. The powers delegated under this power of attorney are separable, so that the invalidity of one or more powers shall not affect any others.

BY MY SIGNATURE I INDICATE THAT I UNDERSTAND THE PURPOSE AND EFFECT OF THIS DOCUMENT.

I sign my name to this form on March 22, 2017,
(Date)

at: Bossier City, LA
(City, State)

Ruth May Kent

(Signature)

WITNESSES

The person who signed or acknowledged this document is personally known to me and I believe him/her to be of sound mind.

First Witness

Signature: ***Lucy Ann Pamway***

Home Address: 892 Franklin Street, Lafayette, LA 70503

Print Name: Lucy Ann Pamway Date: March 22, 2017

Second Witness

Signature: ***Susan Harriet Rogers***

Home Address: 87 Badger Road, Carlisle, LA 71033

Print Name: Susan Harriet Rogers Date: March 22, 2017

NOTARIZATION

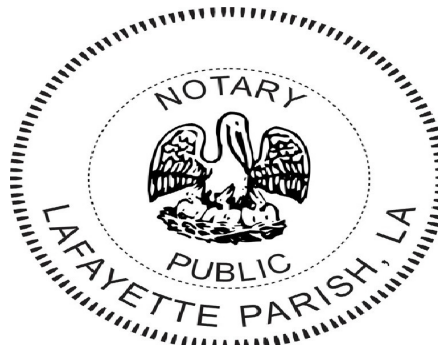
STATE OF LOUISIANA
PARISH OF Bossier

I, Wanda Laroquette a Notary Public in and for the State and Parish aforesaid, do hereby certify that Ruth May Kent who personally came and appeared before me as the Principal, and executed the foregoing Durable Power of Attorney for Health-Care in said State and Parish, and acknowledged said Durable Power of Attorney for Health-Care as the Principal's voluntary act.

Witness my signature this 22 day of March, 2017,

Wanda Laroquette

NOTARY PUBLIC



OPTIONAL CARD

(optional: cut and fill out several copies and date and sign,
then keep copies on you body and where it will be seen if you fall sick)

Notice to Health Care Providers (check boxes and fill out)

☐ I have done a Living Will for those with terminal and irreversible conditions according to doctors.

☒ I have done a Health Care Power of Attorney and appointed: Amy Olivia Kent (Agent)

Phone: 318-555-1234

as my agent to make health care decisions for me if I am unable to do so. My agent has a copy of my complete health care power of attorney.

Date: May 28, 2017 My printed name: Ruth May Kent

My signature: Ruth May Kent

OPTIONAL CARD

(optional: cut and fill out several copies and date and sign,
then keep copies on you body and where it will be seen if you fall sick)

<u>Notice to Health Care Providers</u> (check boxes and fill out) ☐ I have done a Living Will for those with terminal and irreversible conditions according to doctors. ☒ I have done a Health Care Power of Attorney and appointed: <u>Amy Olivia Kent</u> (Agent) Phone: <u>318-555-1234</u> as my agent to make health care decisions for me if I am unable to do so. My agent has a copy of my complete health care power of attorney. Date: <u>May 28, 2017</u> My printed name: <u>Ruth May Kent</u> My signature: <u>Ruth May Kent</u>
--

**SAMPLE FILLED OUT
FORM 4:
LIVING WILL**

STATE OF LOUISIANA

LIVING WILL

DECLARATION

Declaration made this 5th day of July, 2017 (month, year).

I, Charles John Coe, being of sound mind, willfully and voluntarily make known my desire that my dying shall not be artificially prolonged under the circumstances set forth below and do hereby declare:

see below for details

If at any time I should have an incurable injury, disease or illness, or be in a continual profound comatose state with no reasonable chance of recovery, certified to be a terminal and irreversible condition by two physicians who have personally examined me, one of whom shall be my attending physician, and the physicians have determined that my death will occur whether or not life-sustaining procedures are utilized and where the application of life-sustaining procedure would serve only to prolong artificially the dying process, I direct (initial one only):

C. J. C. That all life-sustaining procedures, including nutrition and hydration, be withheld or withdrawn so that food and water will not be administered invasively.

 That life-sustaining procedures, except nutrition and hydration, be withheld or withdrawn so that food and water can be administered invasively.

I further direct that I be permitted to die naturally with only the administration of medication or the performance of any medical procedure deemed necessary to provide me with comfort care.

In absence of my ability to give directions regarding the use of such life-sustaining procedures, it is my intention that this declaration shall be honored by my family and physician(s) as the final expression of my legal right to refuse medical or surgical treatment and accept the consequences from such refusal.

I understand the full import of this declaration and I am emotionally and mentally competent to make this declaration.

Signed Charles John Coe

City, Parish, and State of Residence Kenner, Jefferson Parish, Louisiana

The declarant has been personally known to me and I believe him or her to be of sound mind.

Witness Eunice Hart

Witness Edgar Vernon Rogers

SAMPLE FILLED OUT
FORM 5:
Louisiana Physician Orders for Scope of Treatment (LaPOST)

LOUISIANA PHYSICIAN ORDERS FOR SCOPE OF TREATMENT (LaPOST)

FIRST follow these orders, **THEN** contact physician. This is a Physician Order Sheet based on the person's medical condition and wishes. Any Section not completed implies full treatment for that section. Everyone shall be treated with dignity and respect. Please see www.La-POST.org for information regarding "what my cultural/religious heritage tells me about end of life care."

LAST NAME

Johnson

FIRST NAME/MIDDLE INITIAL

Michael D.

DATE OF BIRTH

May 5, 1960

PATIENT'S DIAGNOSIS OF LIFE LIMITING DISEASE AND IRREVERSIBLE CONDITION:

chronic heart disease with immediate failure likely

A. CARDIOPULMONARY RESUSCITATION (CPR): PERSON HAS NO PULSE AND IS NOT BREATHING

CHECK ONE ☐ CPR/Attempt Resuscitation (requires full treatment in section B)
☒ DNR/Do Not Attempt Resuscitation (Allow Natural Death)

When not in cardiopulmonary arrest, follow orders in B, C, D and E.

B. MEDICAL INTERVENTIONS: PERSON HAS PULSE OR IS BREATHING

CHECK ONE ☒ COMFORT MEASURES ONLY: Use medication by any route, positioning, wound care and other measures to relieve pain and suffering. Use oxygen, oral suction and manual treatment of airway obstruction as needed for comfort. Patient prefers no transfer: EMS contact medical control to determine if transport indicated.

☐ LIMITED ADDITIONAL INTERVENTIONS: Includes care described above. Use medical treatment, IV fluids and cardiac monitor as indicated. Do not use intubations, advanced airway interventions, or mechanical ventilation. Transfer to hospital if indicated. Avoid intensive care unit if possible.

☐ FULL TREATMENT: Includes care described above. Use intubation, advanced airway interventions, mechanical ventilation. Transfer to hospital if indicated. Includes intensive care unit.

ADDITIONAL ORDERS: (e.g. dialysis, etc.)

C. ANTIBIOTICS

CHECK ONE ☒ No antibiotics. Use other measures to relieve symptoms.

☐ Determine use or limitation of antibiotics when infection occurs, with comfort as goal. (Benefit of treatment should outweigh burden of treatment)

☐ Use antibiotics if life can be prolonged.

☐ ADDITIONAL ORDERS: _____

The administration of nutrition and hydration, whether orally or by invasive means, shall always occur except in the event another condition arises, which is life-limiting or irreversible in which the nutrition or hydration becomes a greater burden than benefit to Patient.

D. ARTIFICIALLY ADMINISTERED FLUIDS AND NUTRITION: (Always offer food/fluids by mouth as tolerated)

CHECK ONE IN EACH COL. ☒ No artificial nutrition by tube. ☐ IV fluids (Goal : _____)

☐ Trial period of artificial nutrition by tube. (Goal: _____) ☒ No IV fluids

☐ Long-term artificial nutrition by tube. (If needed) _____ ☐ ADDITIONAL ORDERS: _____

E. OTHER INSTRUCTIONS (May include additional guidelines for starting or stopping treatments in sections above or other directions not addressed elsewhere.)

F. SUMMARY

Discussed with: ☒ Patient

☐ Personal Health Care Representative

The basis for these orders is:

☒ Patient's declaration (can be oral or nonverbal)

CHECK ALL THAT APPLY ☐ Patient's Personal Health Care Representative (Qualified Patient without capacity)

☐ Patient's Advance Directive, if indicated, patient has completed an additional document that provides guidance for treatment measures if he/she loses medical decision-making capacity.

☐ Resuscitation would be medically non-beneficial.

Dr. Edward A. Carlson

PRINT PHYSICIAN'S NAME

Edward A. Carlson

PHYSICIAN SIGNATURE (MANDATORY)

Michael D. Johnson

225-555-3028

PHONE NUMBER

May 3, 2017

DATE

PATIENT OR PERSONAL HEALTH CARE REPRESENTATIVE SIGNATURE (MANDATORY)

If Personal Health Care Representative, state relationship and authority to act on behalf of patient:

SEND FORM WITH PERSON WHENEVER TRANSFERRED OR DISCHARGED

USE OF ORIGINAL FORM IS STRONGLY ENCOURAGED. PHOTOCOPIES AND FAXES OF SIGNED LaPOST FORMS ARE LEGAL AND VALID.

DIRECTIONS FOR HEALTH CARE PROFESSIONALS

COMPLETING LaPOST

- Must be completed by a physician based on patient preferences and medical indications.
- **LaPOST** must be signed by a physician to be valid. Verbal physician orders are acceptable with follow-up signature by physician in accordance with Louisiana law.
- Use of original form is strongly encouraged. Photocopies and faxes of signed **LaPOST** are legal and valid.

USING LaPOST

- Any section of **LaPOST** not completed implies full treatment for that section.
- A semi-automatic external defibrillator (AED) should not be used on a person who has chosen "Do Not Attempt Resuscitation".
- Even if a patient chooses "no artificial nutrition by tube" or "no IV fluids" or "trial period of artificial nutrition by tube," the administration of nutrition and hydration, whether orally or by invasive means, shall always occur except in the event another condition arises which is life limiting and irreversible in which nutrition and hydration by any means becomes a greater burden than benefit to Patient.
- When comfort cannot be achieved in the current setting, the person, including someone with "comfort measures only," should be transferred to a setting able to provide comfort (e.g. pinning of a hip fracture).
- A person who chooses either "comfort measures only" or "limited additional interventions" should not be entered into a Level I trauma system.
- A parenteral (IV/Subcutaneous) medication to enhance comfort may be appropriate for a person who has chosen "Comfort Measures Only."
- Treatment of dehydration is a measure which may prolong life. A person who desires IV fluids should indicate "Limited Interventions" or "Full Treatment."
- A person with capacity or the personal representative (if the patient lacks capacity) can revoke the **LaPOST** at any time and request alternative treatment based on the known desires of the individual or, if unknown, the individual's best interests.
- Please see links on www.La-POST.org for "what my cultural/religious heritage tells me about end of life care."

The duty of medicine is to care for patients even when they cannot be cured. Physicians and their patients must evaluate the use of technology available for their personal medical situation. Moral judgments about the use of technology to maintain life must reflect the inherent dignity of human life and the purpose of medical care.

REVIEWING LaPOST

This **LaPOST** should be reviewed periodically such as when the person is transferred from one care setting or care level to another, or there is a substantial change in the person's health status. A new **LaPOST** should be completed if the patient wishes to make a substantive change to their treatment goal (e.g. reversal of prior directive). When completing a new form, the old form must be properly voided and retained in the medical chart.

To void the **LaPOST** form, draw line through "Physician Orders" and write "VOID" in large letters. This should be signed and dated.

REVIEW OF THIS LaPOST FORM

REVIEW DATE AND TIME	REVIEWER	LOCATION OF REVIEW	REVIEW OUTCOME
12-11-17	Dr. Ed Carlson	St. Mary's Hospice	☒ No Change ☐ Form Voided and New Form Completed
			☐ No Change ☐ Form Voided and New Form Completed
			☐ No Change ☐ Form Voided and New Form Completed
			☐ No Change ☐ Form Voided and New Form Completed
			☐ No Change ☐ Form Voided and New Form Completed
			☐ No Change ☐ Form Voided and New Form Completed

SEND FORM WITH PERSON WHENEVER TRANSFERRED OR DISCHARGED

USE OF ORIGINAL FORM IS STRONGLY ENCOURAGED. PHOTOCOPIES AND FAXES OF SIGNED LaPOST FORMS ARE LEGAL AND VALID.

**SAMPLE FILLED OUT
FORM 6:
DECLARATION ON FINAL WISHES**

DECLARATION ON FINAL WISHES

(Louisiana Revised Statutes § 37:876 and other laws)

I, Heidi Yanna Knutson, 38 Main Street, Baton Rouge, LA 70809 (name and address) being of sound mind hereby voluntarily make this declaration and say on my death the disposition of my bodily remains and all related issues shall be controlled by Brian Alex Knutson (name of agent) as my agent and as person declared to control this. Such person shall make all decisions concerning funeral, cremation, burial, ceremonies involving my body, use and purchase of goods and services involving my body, and all related things. I do hereby authorize and empower any funeral director, funeral establishment, crematory authority, or any other place or party to accept this notarized declaration as authority including or for cremation of my remains if my agent shall later so request this.

I am not required to but may state certain wishes as follows:

None

Signed this 4th day of October, 20 14.

Signature: **Heidi Yanna Knutson**

NOTARIZATION

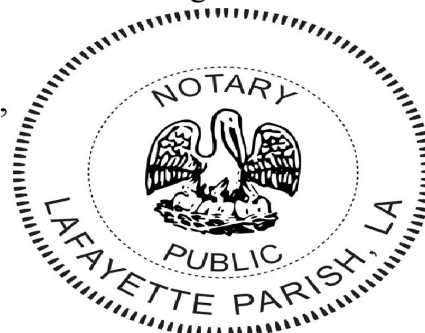
STATE OF LOUISIANA

PARISH OF Bossier

I, Wanda Laroquette a Notary Public in and for the State and Parish aforesaid, do hereby certify that Heidi Yanna Knutson who personally came and appeared before me as the declarant and principal, and executed the foregoing Declaration on Final Wishes in said State and Parish, and acknowledged said document and execution to be his or her voluntary act.

Witness my signature this 4th day of October, 20 14,

Wanda Laroquette
NOTARY PUBLIC



**SAMPLE FILLED OUT
FORM 7:
DURABLE GENERAL POWER OF ATTORNEY**

STATE OF LOUISIANA

PARISH OF Calcasieu Parrish

DURABLE GENERAL POWER OF ATTORNEY

BE IT KNOWN, on the date indicated below, in the presence of the undersigned competent witnesses and notary public, that there PERSONALLY CAME AND APPEARED John Kenneth Hamilton, a person of the full age of majority and a resident of the State of Louisiana, hereinafter referred to as "Principal" or appearer, whose mailing address is 33 Smith Road, Lake Charles, Louisiana , 70609, who declared that Principal has made and appointed, and does ordain, authorize, constitute make Mary Teresa Hamilton, as "Agent" and to be attorney-in-fact for Principal, both general and specific, with full power and authority to act for, in the name of and on behalf of Principal, to do all acts necessary or deemed by Agent to be appropriate for Principal including but not limited to the following:

1. GENERAL BUSINESS AFFAIRS AND BANKING. To conduct, manage and transact the business and personal financial matters of Principal, of every nature and kind with no exception.

2. BANKS AND LOANS. To make and endorse and to accept and to pay promissory notes, drafts and bills of exchange; to sign checks drawn on and to draw money out of any bank, homestead or other financial institution or other account whatsoever in which funds may be on deposit in the name of or for the account of Principal; to deposit checks, drafts and bills of exchange in any account standing in the name of Principal; and to deliver to any bank or other financial institution any promissory notes or other instruments for collection. To open, manage, operate, renew, or close any account at any bank or

financial institution in the name of Principal; to deposit funds therein or withdraw all or part thereof; including certificates of deposit, checking, savings, money market or any other type of account or any Treasury notes or bills; the foregoing being illustrative and without limit of generality of this power.

3. INVESTMENTS AND SECURITIES. To sell, purchase and transfer shares of stock, bonds, or any other securities of any corporation or any other legal entity, whether private or public and whether registered in the name of Principal or not, and to receive and receipt for the sale price thereof; to receive and receipt for all dividends, coupons or other distributions due or to become due thereon; and to deliver, pledge and pawn said shares of stock or bonds. To attend meetings of the stockholders of any corporation or holders of any securities of any legal entity in which Principal may be interested and to vote in the name of Principal on all questions and matters that may be submitted or considered at such meeting. To receive all documents and notices and to exercise all rights and to fulfill all obligations of Principal regarding any security of any type, value or nature.

4. BORROWING OR LENDING OUT. To borrow money in Principal's name from any bank or other financial institution; to make, issue and endorse any promissory note in the name of Principal, to renew the same from time to time; to deliver, pledge and pawn the same; and to waive and renounce any prescription accrued thereon. Also my agent may make loans of property to any person, entity, or other party for such purposes and for such periods, in such amounts and at such rates of interest, with or without security, and subject to such other terms as my Agent may determine.

5. PURCHASE AND SALE AND OPTIONS. To purchase, sell, exchange, partition or otherwise acquire and dispose of any property, at public or private sale for such purposes and upon such terms, including sales on credit, with or without security in such manner, and at such prices as my Agent may determine. My Agent may purchase U.S. Government bonds redeemable at par in payment of federal estate taxes. My agent may grant options affecting any property or other for such purposes and periods, upon such conditions, in such manner, and at such prices as my Agent may determine; to

exercise them for such price and on such terms and conditions as my Agent may see fit.

6. PROPERTY OF ALL TYPES. To sell, mortgage, encumber, pledge, purchase, lease, or grant servitudes pertaining to immovable (real) or movable (personal) property, although not described herein as permitted by Louisiana Civil Code Article 2997 on such terms and conditions as determined by Agent and to execute such documents to effect such acts and receive or pay amounts pursuant to such acts. To exchange property or any other thing for any other property or other thing or to give options to exchange on such terms as my Agent may deem advisable. In any property, my Agent may create servitudes or easements on property for such purposes and periods, upon such conditions, in such manner, and at such price as my Agent may determine. My agent may exchange property for other property or to give options to exchange property upon terms my Agent finds proper. My Agent may hold and retain anything for as long as Agent deems advisable, in any location, even if not appearing suitable or worthwhile, and may hold securities or any other things in the names of nominees.

7. LEASES. To lease or give options to lease all or any part of property for such price, and on such terms and conditions, for such purposes and at such rentals as my Agent may see fit; to enter into, amend or extend all kinds of leases including but not limited to all kinds of leases, surface leases, and oil, gas and mineral leases, with or without pooling provisions.

8. FUELS, MINERALS AND RELATED RIGHTS. To execute mineral leases and other contracts, including unitization and pooling agreements, for the exploration and development of oil, gas, salt, and any minerals in and under any property of Principal or in which Principal may have an interest, on such terms and conditions and for such consideration as Agent may deem proper, and to receive and receipt for the bonuses, rents and proceeds thereof; to execute mineral and property deeds or leases either selling, buying or leasing mineral or royalty rights; and to execute all division orders or other agreements of every nature and kind whatsoever in connection with or relative to said acts.

9. LEGAL ACTIONS. To appear before all courts and to prosecute, defend, or compromise and

settle by agreement, arbitration, or otherwise; to accept service of process on behalf of Principal; to sign all pleadings and do all things necessary; to obtain writs of attachment, sequestration and injunction; and to take appeals and, in any such instances, to furnish and sign on behalf of Principal the requisite security and bonds. My Agent may attend and take any action at meetings of creditors and vote in Principal's name on all questions and matters that may be submitted to or considered at such meeting, including for any kind of bankruptcy and /or any kind of entity. My Agent may institute, supervise, prosecute, defend, intervene in, abandon, compromise, arbitrate, settle, dismiss, and appeal from any and all judicial or administrative proceedings, actions, suits, hearings, attachments, or sequestrations involving me in any way, including claims by or against me arising out of property damages or personal injuries suffered by or caused by me or under circumstances causing the loss to be borne by me.

10. PROBATE AND SUCCESSIONS. To act for and represent Principal judicially and otherwise, whether as heir, legatee, creditor, executor, administrator or otherwise, in all probate actions, successions, and estates in which Principal is, may be or may become interested, including any acceptance or renunciation thereof; to apply for the administration thereof and to demand, obtain and execute all orders, decrees and tax returns as Agent may deem proper; and to settle, compromise and liquidate Principal's interest therein and to receive and receipt for all property and effects to which Principal may be entitled in respect of said successions or estates.

11. ACTS FOR OTHERS. To act for Principal where Principal has been or may be appointed the agent of others; and to vote proxies of others issued in the name of Principal and to execute proxies in favor of others issued in the name of Principal and to execute proxies in favor of others to vote.

12. LEGAL AND OTHER CLAIMS. To demand and obtain and to recover and receipt for anything including money, property and effects to which Principal is now or may be hereafter entitled, and to that end to compromise and adjust all accounts and other obligations and to give good and sufficient discharge and acquittance therefor.

13. GIFTS AND DONATIONS. To give, donate, or transfer without consideration any asset of Principal to any person as determined by Agent.

14. TAX FILINGS AND REPRESENTATIONS AND POWER TO ACT ON TAXES. To file any United States, State of Louisiana or other tax returns (including but not limited to income tax returns); to apply for extensions of time to file tax returns; to file elections related to tax matters; to represent the Principal in connection with any matter relating to any taxes, to grant powers of attorney to any authorized representative and to take any action relating to any taxes, including but not limited to taxes of the United States and the State of Louisiana. To exercise any elections I may have under federal, state or local tax law; and generally to represent me or obtain professional representation for me in all tax matters and proceedings of all kinds and for any period before any taxing authority. To engage, compensate and discharge attorneys, accountants and other tax and financial advisors and consultants to represent or assist me in connection with any tax matter involving or in any way related to me or any property in which I have or may have any interest or responsibility.

15. INSURANCE. To exercise any right, option or privilege available to Principal regarding any policy of insurance of any type, including life insurance or annuities, and including but not limited to the right to surrender the policy, make a policy loan, change the beneficiary, make a claim, receive payment on any claim, elect settlement or disbursement options, receive any check or draft, and endorse, collect and receive the proceeds of same.

16. OPERATION OF BUSINESS. To start or continue to operate or participate in the operation of any of my business interests, so long as my Agent may deem it advisable, to change the nature of the business, or enlarge or diminish the scope of its activities, to dissolve or liquidate it, or to participate in any incorporation, change merger, consolidation, reorganization, dissolution or liquidation. To participate in any plan of liquidation, reorganization, consolidation or merger involving any company or companies whose stock or other securities may be subjected to any plan of reorganization or with any

protective committee and to delegate to such committee discretionary powers with relation thereto and to pay a proportionate part of the expenses of such committee and any such assessments levied under such plan; to accept and retain new securities received by my Agent pursuant to any such plan; to exercise all conversion, subscription, voting and other rights of whatsoever nature pertaining to such property; and to pay any amount or amount of money my Agent may deem advisable. Similarly, my Agent may start or continue to be a partner in such partnerships as my Agent may see fit, whether as a limited or general partner, or partner of any type, and to continue me or my Agent as a partner in any partnership in which I may be a partner or possessed of the right to become a partner, and to consent to the continuation of any partnership that might otherwise terminate even though the articles of partnership may not provide for continuation. Also, my Agent may attend and take any action at meetings of creditors and vote in Principal's name on all questions and matters that may be submitted to or considered at such meeting, including for any kind of bankruptcy and /or kind of entity.

17. IMPROVEMENT AND BUILDING. To raise any buildings or other structures as my Agent may consider expedient; to improve or develop immovable property; to erect, alter, or repair any buildings or other structures and to make any other kind of improvements my Agent may deem proper, to received, accept, hold, use, control, administer, build upon, manage or otherwise improve, repair, divide or subdivide all or any Property in the manner and to the extent my Agent may deem advisable.

18. EMPLOYEES, CONTRACTORS AND AGENTS. To employ or retain such employees, agents and advisors as my Agent may deem necessary, to assist in performing any duties of my Agent, including but not limited to legal advice and work including attorneys, accountants, other professionals, investment advice, management advice, and for any other purposes my Agent considers advisable, and to determine reasonable charges for such services and to make payment.

19. MUTUAL FUNDS AND LIFE INSURANCE. To acquire and retain for so long a period as my Agent may see fit the shares, preferred or common, of investment companies, or investment trusts,

whether of the open-end or closed-end type, and without notice to anyone, to participate in any common trust fund or pooled investment fund. Also, my Agent may insure the life of any other person on whose life I may have an insurable interest. Life insurance shall be in such amounts as my Agent may determine, and in such forms, as my Agent may deem wise by term insurance, ordinary life insurance, stated period payment insurance, endowment insurance or any other kind of life insurance. Proceeds of life insurance shall be made payable to any beneficiary or contingent beneficiary designated by my Agent. My Agent may elect any option provided by any policy. My Agent may surrender any of such policies at any time and obtain the cash surrender value, or may borrow against such value, or may exercise any other right of an owner of the policy.

20. **POWER OF ATTORNEY.** To give such powers of attorney, general or special, with or without power of substitution, in connection with exercise of other powers as my Agent finds proper.

21. **CONTRACTS.** My Agent may enter into any and all kinds of contracts and agreements on my behalf, whether or not specifically described herein.

22. **PENSIONS AND RETIREMENT ACCOUNTS.** To create and contribute to an Individual Retirement Account (IRA) or employee benefit plan (including self-employed plans) for my benefit; to select payment options under plans in which I participate, and to change options I have selected. To make and change beneficiary designations, to make voluntary contributions, to "roll-over" plan benefits into other retirement plans, and to borrow money and purchase assets from plans and to see assets thereof, if authorized by any such plan.

23. **ACCOUNTS AND SAFE-DEPOSIT BOXES.** To establish accounts of all kinds, (including checking and savings) for me with financial institutions, including banks, thrift institutions, brokerage firms, and credit unions. To modify, terminate make deposits to and write checks on or make withdrawals from and grant security interests in all accounts in my name or upon which I or my Agent are authorized signatories (except accounts held by me in a fiduciary capacity), whether such account

was established by me or for me by my Agent. To negotiate, endorse or transfer any checks or other instruments with respect to any account; to contract for any services rendered by any bank or other institution. Also my Agent may contract with any institution for a safe-deposit box in my name, or to have access to all safe-deposit boxes in my name or to which I am an authorized signatory, and may add to and remove from the contents of any safe deposit box and to terminate contracts for such.

24. TRUSTS. My Agent may execute trust instruments on my behalf as settlor or co-settlor, whether or not I am a beneficiary. To make gifts in trust on my behalf to trusts created by my Agent or to others trusts. To provide that a trust shall be revocable or irrevocable, and interests in the trust spendthrift or freely alienable. To serve as trustee of any other trust created by or for my benefit. To add any trust on my behalf. To withdraw or receive the income or principal and to request or demand such withdrawals of any trust.

25. ACTIONS INVOLVING FIDUCIARY OFFICES. To renounce any fiduciary office to which I may be appointed or elected, including (but not limited to) executor, administrator, personal, representative, trustee, tutor, curator, guardian, attorney-in-fact, or officer or director of a corporation. to render such accountings of my activities as may be required.

26. SUPPORT OF PERSONS. To continue to support any person I have undertaken to support or to whom I may owe an obligation of support. Support may include payment of real property taxes, payments on loans secured by my residence, maintenance of my residence, food, clothing and shelter, medical, dental and psychiatric care, normal vacations and travel expenses; education, (including education at vocational and trade schools, training in music, stage, arts and sports, special training provided at institutions for the mentally or physically handicapped, preparatory, undergraduate and graduate or professional study in any field at public or private universities, colleges or other institutions of higher learning) including payments for tuition, books and incidental charges made by the educational institutions, travel costs to and from such institutions, room and board, and spending

money. If I have been legally separated or divorced from my spouse, any support provided to such spouse by my Agent shall be limited to such support as may be required by law.

27. MY LIVING EXPENSES AND CARE. My Agent may provide for my continued and further maintenance and support, of any type and nature, including my housing, food, insurance, transportation, servants, or other, whether such are existing or are new additions. My Agent may contract for institutional health care (hospital, retirement, facility, nursing home, hospice or other) on my behalf. My Agent may sell, exchange, lease, sublease or dispose of my home and such of its contents as are no longer useful to me and are not specifically bequeathed in my will, all on such terms as to price, payment and security as my Agent deems reasonable.

28. FUNERAL AND BURIAL. Arrange and contract for my funeral including appropriate arrangements and instructions for my funeral service or memorial service, including purchase of a burial plot or other appropriate disposition of my body. My Agent shall comply with such known written instructions as I may have or leave.

29. FULL ACCESS TO RECORDS AND INFORMATION. My Agent is given full access and right to all document, records, and information which relates in any way to me or my affairs, whether personal or business, including health care, and no matter how private or confidential. Persons who get requests for information from my Agent are authorized to furnish it, as and when requested. I release them from any and all legal liability for furnishing the information my Agent requests. If that information is privileged, I waive the privilege. My Agent may disclose any information to such others as my Agent may deem appropriate. My Agent may request, receive, take from US Mail, open, read, respond to and redirect any written communications directed to me. My Agent may have access to any medical information in any form regarding my physical or mental condition, and to execute such consents as may be related. My Agent may receive and open all letters, telegrams, cablegrams, emails, files and databases I have or have any right to access, and any other thing addressed to me and to answer

any such in principal's name.

30. SUBSTITUTE AGENT AND ATTORNEY-IN-FACT. Principal hereby grants the Agent in office the power to appoint or remove a substitute Agent and attorney-in-fact, including any co-Agent or similar which the Principal may name or appoint. My there is no Agent or attorney-in-fact acting under this document due to their unavailability including illness or death, any Court may appoint or name a person to act as Agent.

31. GENERAL. My Agent, in addition to all other powers and grants, may also do and perform each and every other act, matter or thing whatsoever as may be appropriate in Agent's discretion as if such act, matter or thing were or had been particularly stated herein. With regard to any property or other interest of mine, or any action my agent may wish to do, my Agent is given and shall have all of the powers that may be conferred upon agents under applicable law. If a question shall arise as to whether Agent has a particular power, this agency shall be liberally construed as granting such power. Should future changes in the law expand powers of agents, my Agent shall get those expanded powers. The Agent is authorized generally to do and perform all and every act, matter and thing whatsoever, as shall or may be requisite and necessary or helpful to the things described above, and the Agent may act and do things just as Principal could or might do if personally present, and Principal hereby ratifies and confirms all the Agent may lawfully do or cause to be done by virtue of this Power of Attorney.

LIABILITY AND RELEASE OF AGENT. My Agent shall be liable only for breach of duty to Principal committed in bad faith with willful misconduct or gross negligence. Principal shall indemnify Agent and hold Agent harmless for all reasonable costs, fees and expenses regarding all matters hereunder, legal actions brought by or against the Agent for which Agent is not liable. I release and discharge my Agent and my Agent's heirs, successors and assigns from any and all liability to me, my heirs, successors and assigns arising out of any acts or omissions of my Agent, except for willful

misconduct or gross negligence. My Agent shall have no responsibility to make my property productive of income, to increase the value of my estate or to diversify my investments.

RELIANCE BY OTHERS. This power of attorney may be filed and recorded with the Clerk of Court for any Parish and registered in the conveyance records, and shall remain in effect as to third persons dealing with the agent until either such power or substitute power of attorney is revoked by notarial act and recorded as set forth above, and/or the third person receives actual notice of revocation. If any party who relies on this Power of Attorney delivers written notice to the Principal, this Power of Attorney shall remain in effect until such party receives written notice to the Principal, this Power of Attorney shall remain in effect until such party receives written notice of revocation, notwithstanding recordation of revocation as stated above.

AGENT'S REIMBURSEMENT AND COMPENSATION. My Agent shall be entitled to reimbursement for costs and expenses reasonably incurred on my behalf, and also shall be entitled to reasonable compensation for my Agent's work which my Agent may withdraw or pay without any court action, any notice, or any other thing.

THIS DOCUMENT AND POWER OF ATTORNEY EFFECTIVE IMMEDIATELY. This document and power of attorney is effective immediately, and the effect of such and all power and authority stated and given herein shall arise and be given immediately when this document is executed without need for any event or trigger including any change in health or absence. No lapse or passage of time, or inaction, will cancel or void or end this document and it is perpetual until revoked.

DURABILITY. This document and power-of-attorney and agency is "durable" and shall not be deemed revoked by my disability or incapacity or similar. It is expressly said any procuration or act of procuration and also any mandate or power or position related to such shall expire or lapse in the event

of any incapacity, disability, or similar. No lapse or passage of time, or inaction, will cancel or void or end this document and Power of Attorney which is perpetual until revoked.

EXECUTION

THUS DONE AND PASSED in Calcasieu Parish, Louisiana, by the principal making and signing this document below before the undersigned competent witnesses who sign below and before me the below notary public , on November 25 , 2016 .

Signature of Principal: *John Kenneth Hamilton*

Print Name: John Kenneth Hamilton

Signature of Witness: *Michael John Weston*

Print Name: Michael John Weston

Signature of Witness: *Wendy Brita Windsor*

Print Name: Wendy Brita Windsor

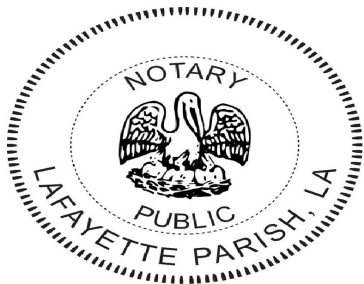
Sophie Rose Lindwood

NOTARY PUBLIC

NOTARY PUBLIC, PARISH OF Calcasieu, STATE OF LOUISIANA

MY COMMISSION EXPIRES ON : Dec. 22, 2022

NOTARY NUMBER: 2890432



STATE OF LOUISIANA

PARRISH OF Calcasieu

ACCEPTANCE BY AGENT OF POWER OF ATTORNEY
(optional)

BEFORE ME, Notary Public, duly commissioned and qualified, in and for the Parish and State aforesaid, and in the presence of the named and undersigned competent witnesses there PERSONALLY CAME AND APPEARED Mary Teresa Hamilton who hereby accepts the appointment created by this Power of Attorney to act as Principal's true and lawful agent and attorney-in-fact.

THUS DONE AND PASSED, in the Parish of Calcasieu, State of Louisiana, before the undersigned competent witnesses and me, Notary Public, this the 25 th day of May, 2016.

Signature of Agent and Attorney-in-Fact: Mary Teresa Hamilton

Print Name: Mary Teresa Hamilton

Signature of Witness: Michael John Weston

Print Name: Michael John Weston

Signature of Witness: Wendy Brita Windsor

Print Name: : Wendy Brita Windsor

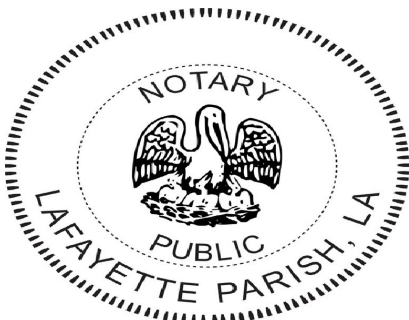
Sophie Rose Lindwood

NOTARY PUBLIC

NOTARY PUBLIC, PARISH OF Calcasieu, STATE OF LOUISIANA

MY COMMISSION EXPIRES ON : Dec. 22, 2022

NOTARY NUMBER: 2890432



END OF BOOK