## LETTER OF UNDERSTANDING

TO:

I am enclosing a Power of Attorney in which I have named as my attorney-in-fact. You and I have agreed that you will do the following:

1. Upon my written request, you will deliver the Power of Attorney to me or to any person whom I designate.
2. You will deliver the Power of Attorney to the person named as my attorney-in-fact (if more than one person is named, you may deliver it to either of them) if you determine, using your best judgment, that I am unable to conduct my business affairs due to disability, impairment, incapacity, illness, or absence. In determining whether to deliver the Power of Attorney, you may use any reasonable means you deem adequate, including consultation with my physician(s) and family members. If you act in good faith, you will not be liable for any acts or omissions on your part in reliance upon your belief.
3. If you incur expenses in assessing whether you should deliver this Power of Attorney, I will compensate you for the expenses incurred. You should show these signed directions to my Attorney-in-Fact along with records of expenses you incurred to claim reimbursement under this agreement.
4. You do not have any duty to check with me from time to time to determine whether I am able to conduct my business affairs. I expect that if I am unable to conduct my business affairs, you will be notified by a family member, friend, or colleague of mine.

 [Trusted Family Member or Friend/Attorney-in-Fact] [Date]

 [Planning Attorney] [Date]