**OKLAHOMA LIMITED POWER OF ATTORNEY**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **[FULL LEGAL NAME],**

 **[TITLE],** OF

 **[NAME OF BUSINESS]**

**("Principal"),** located at

 \_ **[FULL**

**ADDRESS]**, being duly authorized, hereby appoint

 **[AGENT'S NAME]** of

**[AGENT'S FULL ADDRESS],** as Principal's Attorney-in-Fact **("Agent").**

Agent shall have power and authority to act on behalf of the aforesaid Principal for the limited purpose of complying with the unclaimed property laws of the State of Oklahoma. Agent's powers shall include, but not be limited to, the power to:

1. complete and execute holder reports on Principal's behalf;
2. correspond and communicate with representatives from the Oklahoma State Treasurer on Principal's behalf; and
3. execute on Principal's behalf any other documents required by the Oklahoma State Treasurer to comply with the unclaimed property laws of the State.

This Power of Attorney shall be construed according to Oklahoma law.

This Power of Attorney shall become effective immediately and shall continue until revoked.

Any third party who receives a copy of this document may act under it. Revocation of the power of attorney is not effective as to a third party until the third party learns of the revocation.

Principal agrees to indemnify the third party for any claims that may arise against the third party because of reliance on this power of attorney.

YOU’RE SIGNATURE:

YOU’RE TITLE:

PRINCIPAL'S NAME:

STATE OF )

)ss COUNTY OF )

Before me, a notary in and for this state, on this day of , 200 ,personally appeared **[YOUR FULL NAME]** to me known to be the identical person who subscribed the name of the maker thereof to the foregoing instrument as its **[YOUR TITLE]** and acknowledged to me that he/she executed the same as his/her free and voluntary act and deed, and as the free and voluntary act and deed of the Principal, for the uses and purposes therein set forth.

**Notary Public**

**My commission expires:**

**Commission no**.