Federal Deposit Insurance Corporation

POWER OF ATTORNEY

	Financial Institution: FAILED BANK
	Closing Date: XX/XXXXX
	Account number: 12345678
)	Group Number: 1000
)	COUNTY OF: Warren
)	STATE OF: PXAS
	The undersigned hereby makes, constitutes and appoints
)	of Smith + Associates my agent and attorney, for me and in my place and
	stead, to make proof of claim for all insured deposits owned by me in the closed financial institution
	, and to transfer and assign the claim for such insured deposits to the Federal Deposit Insurance Corporation and to receive from the Federal Deposit Insurance Corporation
	any money made available by the Federal Deposit Insurance Corporation to pay the insured deposit liability of such closed financial institution to me, hereby ratifying everything that my said agent and attorney shall do in the premises
	with like effect as if done by me in person.
	(Im Greet Austin, Texas 54321
	Signature of Accountholder Address
	Jim Jones <u>III Main Street</u> Austin, Texas 5432
	Printed Name Address
	SUBSCRIBED AND SWORN TO BEFORE ME, this
	$M \cdot OI$
	May Johnson
	Signature of Notary Public in and for the above County & State
	MY COMMISSION EXPIRES:
	Mary Johnson
	Printed Name of Notary Public

THE PENALTY FOR KNOWINGLY MAKING OR INVITING RELIANCE ON ANY FALSE, FORGED OR COUNTERFEIT STATEMENT, DOCUMENT OR THING FOR THE PURPOSE OF INFLUENCING IN ANY WAY THE ACTION OF THE FEDERAL DEPOSIT INSURANCE CORPORATION IS A FINE OF NOT MORE THAN \$1,000,000 OR IMPRISONMENT FOR NOT MORE THAN THIRTY YEARS, OR BOTH (18 U.S.C. § 1007).