

SPECIAL POWER OF ATTORNEY

THIS IS A MILITARY POWER OF ATTORNEY PREPARED AND EXECUTED PURSUANT TO TITLE 10, UNITED STATES CODE, SECTION 1044B, BY A PERSON AUTHORIZED TO RECEIVE LEGAL ASSISTANCE FROM THE MILITARY SERVICES. FEDERAL LAW EXEMPTS A MILITARY POWER OF ATTORNEY FROM ANY REQUIREMENT OF FORM, SUBSTANCE, FORMALITY OR RECORDING THAT IS PRESCRIBED FOR POWERS OF ATTORNEY BY THE LAWS OF ANY STATE, COMMONWEALTH, TERRITORY, DISTRICT, OR POSSESSION OF THE UNITED STATES. FEDERAL LAW SPECIFIES THAT A MILITARY POWER OF ATTORNEY SHALL BE GIVEN THE SAME LEGAL EFFECT AS A POWER OF ATTORNEY PREPARED AND EXECUTED IN ACCORDANCE WITH THE LAWS OF THE JURISDICTION WHERE IT IS PRESENTED.

KNOW ALL PERSONS, that I, _____, a legal resident of _____, whose address is _____, and presently assigned to Osan Air Base or Camp Humphreys, Republic of Korea, desiring to execute a SPECIAL POWER OF ATTORNEY, do hereby appoint the following Osan Middle School Faculty Member

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|-------------------|-------------------|--------------------|
| Badidis, Colleen | Kwon, Taebong | Wallace, Shay |
| Carlin, Thomas | Laird, Stephanie | Chapman, Karen |
| Dixon, Tyler | Mc Daniel, Tim | Geer, Andrea |
| Downey, Shelly | McIntyre, Martha | Smith, Jennifer |
| Fenimore, Allison | Miano, Heather | Hopkins, Tynia |
| Gourdin, Shannon | Mitchell, Rick | Massey, Brenda |
| Hampton, Katie | Paul, Michael | Badidis, Apostolos |
| Hoagland, Monica | Sagstetter, David | Robinson, Andrea |
| Sanchez, Carina | | |

as my Attorney-in-Fact to act as follows, GRANTING unto my said Attorney full power to do all acts necessary or required to safeguard the health and welfare of my child:

Child's Name _____ DOB _____

due to medical and emergency evacuation reasons.

Such action shall include, but shall not be limited to, granting consent for any and all medical and hospital care and treatment including major surgery, deemed necessary by a duly licensed physician selected by my Attorney-in-Fact.

All business transacted by means of this power shall be transacted in my name, and all endorsements and instruments executed by my said Attorney shall contain my name, followed by that of my said attorney and the designation "Attorney-in-Fact."

TERMINATION: Unless sooner revoked or terminated by me, this Special Power of Attorney shall become NULL and VOID at the end of school year.

Notwithstanding my insertion of a specific expiration date herein, if on the above specified expiration date, I shall be or have been carried in a military status of "missing-in-action," or "prisoner of war," then this power of attorney shall automatically remain valid and in full effect until sixty (60) days after I have returned to United States Military control following termination of such status. This power of attorney shall not be affected by the disability of the principal.

IN WITNESS WHEREOF, I hereunto set my hand this _____, 20__.

Grantor's Signature

With the United States Armed Forces

At Osan Air Base or Camp Humphreys, Republic of Korea, I, _____ the undersigned noncommissioned officer, do hereby certify that on this ___ day of _____ 200__, before me personally appeared _____, who signed and executed the foregoing instrument. I do further certify that I am, at the date of this certificate, a noncommissioned officer of the grade, branch of service and organization stated below in the active service capacity as Paralegal to the Staff Judge Advocate, 51 FW/JA Osan Air Base, Republic of Korea.

Paralegal