

DURABLE POWER OF ATTORNEY INFORMATION FORM



LAW OFFICE OF
GLENN J. ANDREONI, INC.

Email: lori@rrealestatelaw.com and brianna@rrealestatelaw.com

Fax: (401) 334-0696

Phone: (401) 334-4770

Please **FULLY** read and complete the applicable sections of this form. Once completed, please email or fax this form using the contact information provided above. If you have any questions please feel free to contact us.

Name of individual who requires the power of attorney: _____

Primary residential address: _____

Phone number: _____

Email address: _____

Name of individual who is being given the power of attorney: _____

Primary residential address: _____

Phone number: _____

Email address: _____

Name of **alternate** individual who is being given the power of attorney: _____

Primary residential address: _____

Phone number: _____

Email address: _____

Do you need a power of attorney for health reasons? Yes No

Do you need a power of attorney for financial reasons? Yes No