

152 Longwood Dr • Monticello, AR 71655

Phone: 1-877-757-3731 mail@originfundsdiscovery.com

LIMITED POWER OF ATTORNEY

I, <CLAIMANT NAME(S) HERE> ("Grantor") hereby appoint Origin Funds Discovery LLC ("Attorney in Fact") as my true and lawful attorney to claim funds on my behalf and claimable by me that are currently held by any government agency, business or individual.

I give and grant unto my Attorney in Fact full authority and power to make inquiries about monies that may be claimable by me from any government agency, business or individual, fill in any applications, file petitions or lawsuits, make inquiries, hire or get assistance from an attorney, endorse any payment received from any person or entity so my Attorney in Fact can deposit those funds into a bank account held by my Attorney in Fact. My Attorney in Fact is then authorized to deduct any fees due them under a separate fee agreement between myself and my Attorney in Fact, and to then forward the balance of funds to me.

It is my intent that my Attorney in Fact shall perform any and all other acts necessary or incident to the performance and execution of the powers herein expressly granted with power to do and perform all acts authorized hereby; as fully to all intents and purposes as the Grantor might or could do if personally present.

This Power of At	torney will cease	ey will cease twelve (12) months from date hereof.		
Dated this	day of	, 20		
Grantor (Claimant)		Grantor (Claimant)		



Notarization

State or)	
: ss. County of)	
I, the undersigned Notary Public in and for the above name State and County, hereby certify that on the day of personally appeared before me	_ 20,
to me known to be the individual(s) described in and who executed the with instrument, and that he/she/they acknowledged that he/she/they signed the as his/her/their free and voluntary act and deed, for the uses and purposes mentioned.	nin e same
SignedNota	ry Public
Commission No.:	
My commission expires:	