

Limited Power of Attorney

MS1307 REV 5/25

CALSTRS®

California State Teachers' Retirement System
P.O. Box 15275 | MS 85
Sacramento, CA 95851-0275
800-228-5453
CalSTRS.com

NOTICE: THE POWERS GRANTED BY THIS DOCUMENT ARE BROAD AND SWEEPING AS IT PERTAINS TO RETIREMENT PLAN TRANSACTIONS. THEY ARE EXPLAINED IN THE POWER OF ATTORNEY LAW (CALIFORNIA PROBATE CODE SECTIONS 4400–4545). IF YOU HAVE ANY QUESTIONS ABOUT THESE POWERS, OBTAIN COMPETENT LEGAL ADVICE. THIS DOCUMENT DOES NOT AUTHORIZE ANYONE TO MAKE MEDICAL AND OTHER HEALTH CARE DECISIONS FOR YOU. YOU MAY REVOKE THIS POWER OF ATTORNEY IF YOU LATER WISH TO DO SO.

I, _____ (name, address, and Client ID or SSN), appoint as my attorney-in-fact the following:

_____	(Printed or typed name of attorney-in-fact #1)
_____	(Address of attorney-in-fact, line 1)
_____	(Address of attorney-in-fact, line 2)
_____	(Phone number and email of attorney-in-fact #1)
_____	(Printed or typed name of attorney-in-fact #2)
_____	(Address of attorney-in-fact, line 1)
_____	(Address of attorney-in-fact, line 2)
_____	(Phone number and email of attorney-in-fact #2)

You must provide valid photographic identification for any attorney-in-fact before this document is operable.

I intend to create a limited power of attorney by appointing the above individual(s) to make retirement-related decisions for me as allowed in the California Probate Code. The authority under this power of attorney is limited to decisions for my retirement benefits with the California State Teachers' Retirement System. I give my attorney-in-fact, also called an agent, the power to make changes to my retirement account except as otherwise provided below or as prohibited by the Teachers' Retirement Law. I grant this authority voluntarily and on condition that an attorney-in-fact will use these powers for my benefit and exercise these powers only in a fiduciary capacity. This limited power of attorney does not allow my attorney-in-fact to make medical decisions for me.





Instructions

Initial either or both of the following sentences if you want to limit your attorney-in-fact's authority to designate beneficiaries:

- _____ I do not want my agent (attorney-in-fact) to designate beneficiaries or change existing designations under any retirement plans.
- _____ I do not want my agent (attorney-in-fact) to designate themselves as a beneficiary.

In addition to any restrictions above, I prohibit my attorney-in-fact from conducting the following transactions with CalSTRS (If not applicable, leave blank.):

Unless you direct otherwise, this power of attorney is effective immediately and will continue until it is revoked. Initial one of the following sentences:

- _____ This power of attorney will continue to be effective even if I become incapacitated.
- _____ This power of attorney will cease if I become incapacitated.

EXERCISE OF POWER OF ATTORNEY WHERE MORE THAN ONE AGENT IS DESIGNATED**Instructions**

Initial one of the following sentences:

- _____ If I have designated more than one agent, the agents are to act separately.
- _____ If I have designated more than one agent, the agents are to act jointly.

I agree that CalSTRS may act under this power of attorney and that CalSTRS may seek identification from any attorney-in-fact. Revocation of the power of attorney is not effective until CalSTRS has actual knowledge of the revocation. I agree to indemnify CalSTRS for any claims that arise against CalSTRS because of reliance on this power of attorney. *I have read and understand the notice under California Probate Code Section 4128 set forth below. I further understand that the notice under California Probate Code Section 4128 is broader than the authority under this limited power of attorney.*

A true copy of this CalSTRS Limited Power of Attorney shall have the same force and effect as an original.

Signed this _____ day of _____, 20_____

_____ (Your signature)

NOTICE UNDER CALIFORNIA PROBATE CODE SECTION 4128

Notice to person executing durable power of attorney

A durable power of attorney is an important legal document. By signing the durable power of attorney, you are authorizing another person to act for you, the principal. Before you sign this durable power of attorney, you should know these important facts:

- Your agent (attorney-in-fact) has no duty to act unless you and your agent agree otherwise in writing.
- This document gives your agent the powers to manage, dispose of, sell, and convey your real and personal property, and to use your property as security if your agent borrows money on your behalf. This document does not give your agent the power to accept or receive any of your property, in trust or otherwise, as a gift, unless you specifically authorize the agent to accept or receive a gift.
- Your agent will have the right to receive reasonable payment for services provided under this durable power of attorney unless you provide otherwise in this power of attorney.
- The powers you give your agent will continue to exist for your entire lifetime, unless you state that the durable power of attorney will last for a shorter period of time or unless you otherwise terminate the durable power of attorney. The powers you give your agent in this durable power of attorney will continue to exist even if you can no longer make your own decisions respecting the management of your property.
- You can amend or change this durable power of attorney only by executing a new durable power of attorney or by executing an amendment through the same formalities as an original. You have the right to revoke or terminate this durable power of attorney at any time, so long as you are competent.
- This durable power of attorney must be dated and must be acknowledged before a notary public or signed by two witnesses. If it is signed by two witnesses, they must witness either the signing of the power of attorney or the principal's signing or acknowledgment of their signature. A durable power of attorney that may affect real property should be acknowledged before a notary public so it may easily be recorded.
- You should read this durable power of attorney carefully. When effective, this durable power of attorney will give your agent the right to deal with property that you now have or might acquire in the future. The durable power of attorney is important to you. If you do not understand the durable power of attorney, or any provision of it, you should obtain the assistance of an attorney or other qualified person.

Notice to person accepting the appointment as attorney-in-fact

By acting or agreeing to act as the agent (attorney-in-fact) under this power of attorney, you assume the fiduciary and other legal responsibilities of an agent. These responsibilities include the legal duty to:

- Act solely in the interest of the principal and to avoid conflicts of interest.
- Keep the principal's property separate and distinct from any other property owned or controlled by you.

You may not transfer the principal's property to yourself without full and adequate consideration or accept a gift of the principal's property unless this power of attorney specifically authorizes you to transfer property to yourself or accept a gift of the principal's property. If you transfer the principal's property to yourself without specific authorization in the power of attorney, you may be prosecuted for fraud and/or embezzlement. If the principal is 65 years of age or older at the time the property is transferred to you without authority, you may also be prosecuted for elder abuse under Penal Code Section 368. In addition to criminal prosecution, you may also be sued in civil court.



I have read the foregoing notice and understand the legal and fiduciary duties that I assume by acting or agreeing to act as the agent (attorney-in-fact) under the terms of this limited power of attorney.

Date: _____

(Signature of attorney-in-fact #1)

(Name of attorney-in-fact #1)

Date: _____

(Signature of attorney-in-fact #2)

(Name of attorney-in-fact #2)

NOTE: THIS DURABLE POWER OF ATTORNEY MUST BE DATED AND ACKNOWLEDGED BEFORE A NOTARY PUBLIC OR SIGNED BY TWO WITNESSES. IF IT IS SIGNED BY TWO WITNESSES, THEY MUST WITNESS EITHER THE SIGNING OF THE POWER OF ATTORNEY OR THE PRINCIPAL'S SIGNING OR ACKNOWLEDGMENT OF THEIR SIGNATURE. EACH WITNESS MUST BE A MENTALLY COMPETENT ADULT. WITNESSES SHOULD IDEALLY RESIDE CLOSE BY, SO THEY WILL BE EASILY ACCESSIBLE IN THE EVENT THEY ARE NEEDED TO AFFIRM THIS DOCUMENT'S VALIDITY. EACH WITNESS WILL NEED TO PROVIDE THEIR CURRENT ADDRESS, PHONE NUMBER AND EMAIL. **YOUR ATTORNEY-IN-FACT MAY NOT BE A WITNESS TO YOUR SIGNATURE.**



STATEMENT OF WITNESSES

On the date written on page 4, I declare under penalty of perjury under the laws of California that the person who signed or acknowledged this document is personally known to me (or proved to me on the basis of convincing evidence) to be the principal, that the principal signed or acknowledged this durable power of attorney in my presence, that the principal appears of sound mind and under no duress, fraud or undue influence, that I am not the person appointed as attorney-in-fact by this document. I am not related to the principal by blood, marriage or adoption, and to the best of my knowledge, am not entitled to any part of the estate of the principal upon the death of the principal under a will now existing or by operation of law. I am not an attorney-in-fact for the principal.

____ (Signature of witness #1)
____ (Printed or typed name of witness #1)
____ (Address of witness #1, line 1)
____ (Address of witness #1, line 2)
____ (Phone number of witness #1)
____ (Email of witness #1)

____ (Signature of witness #2)
____ (Printed or typed name of witness #2)
____ (Address of witness #2, line 1)
____ (Address of witness #2, line 2)
____ (Phone number of witness #2)
____ (Email of witness #2)

ACKNOWLEDGEMENT

A notary public or other official completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy or validity of that document.

State of California, county of _____

On _____ before me, _____, a notary public, who proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to the within instrument and acknowledged to me that they executed the same in their authorization capacity, and that by their signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument. *I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.*

WITNESS my hand and official seal.

NOTARY PUBLIC SEAL

Notary public signature