

POWER OF ATTORNEY

The original Power of Attorney document should be submitted to your named attorney-in-fact for safekeeping. If you do not submit the original to the attorney-in-fact, please notify named person(s) of where the original document is kept in the event it is needed. Power of Attorney documents are to be recorded and filed with your County Register of Deeds' (ROD) office before use. Please check with your local RODs' office for filing and recording fees. Notify your named attorney-in-fact as to where the original document is kept, if you have not submitted original document to named person. Explain in detail your individual specific desires as to the authority you have bestowed upon them. As long as you are of sound mind, you may withdraw your Power of Attorney document in writing or change the document. If you consider withdrawing or changing a Power of Attorney document, you should consult with a private attorney or Legal Aid's office in the area where you reside and complete a Revocation form..

DEFINITIONS

- ❖ Executrix--female term for person administering the estate of someone's will
- ❖ Executor--male term for person administering the estate of someone's will
- ❖ Health Care Agent(s)--person or persons named to the duty of making health care decisions
- ❖ Attorney-in-fact--person named to the duty of selected business responsibilities of another

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SAFEKEEPING AND USE
OF YOUR
LEGAL DOCUMENTS

Wills, Living Wills, Power of Attorneys,
Health Care Power of Attorneys

PREPARED BY:

LEGAL AID OF NORTH CAROLINA, INC.
WILMINGTON OFFICE

General Instructions For Legal Documents

- ❖ The original document(s) once signed (executed), witnessed and notarized, cannot be marred or written upon.
- ❖ Upon execution of the document(s), you are free to make copies and provide where needed.
- ❖ The original Will and/or Living Will should be kept in your possession and stored in a locked fire-proof box, not at the bank in a safety deposit box.
- ❖ The original Power of Attorney and/or Health Care Power of Attorney should be submitted to your Attorney-In-Fact and/or Health Care Agent.
- ❖ If you should relocate to another state, have the document(s) reviewed for applicability by a private attorney or a Legal Aid's office in the state in which you reside.
- ❖ The document(s) should be reviewed by you at least every three (3) to five (5) years for possible desired changes and by a qualified private attorney or Legal Aid's office.
- ❖ In the future, if you continue to be of sound mind you may change or revoke your original document(s). Prior to any changes you should consult with a private attorney or Legal Aid's office in the area where you reside.

WILL

If you are of sound mind, you may later add a codicil (addition) to the Will or change it entirely. If you wish to have a codicil prepared, please see a private attorney to assist you in the matter. If any changes are made, please do not destroy your present Will until you receive instructions from the attorney or paralegal that's assisting you with the changes to the document.

Please check with your local Register of Deeds' office to find out if you may have your Will placed in the vault for safekeeping.

The Administrator of the estate, (*also known as-Executrix or Executor*), named person to carry out your wishes as set forth in the document, should be informed of the location of the original Will. After your death, the only document that will satisfy the court system, will be the original executed (signed) document. Before the process of probate may begin, the Administrator must submit to the Civil Clerk of Court, Estates Division Clerk the original executed Last Will and Testament and an original death certificate.

LIVING WILL

Notify a close family member, friend or clergy where the original document is kept. Provide a copy to your close family member(s), caretakers, health care providers, doctors, hospitals, rehabilitation and nursing home facilities. As long as you are of sound mind, you may withdraw your Living Will in writing or change the document. It is advised that if you consider withdrawing or changing the document you

should consult with a private attorney or Legal Aid's office in the area where you reside. If the withdrawal or change takes place, you should notify all that hold a copy of the original document or know where the original is kept.

HEALTH CARE POWER OF ATTORNEY

The original Health Care document should be submitted to your health care agent for safekeeping. If you do not submit the original to the health care agent, please notify named person(s) of where the original document is kept in the event it is needed. You also should explain in detail your individual specific desires as to health care provisions, life sustaining treatment, nursing or rehabilitation facilities. The Health Care Power of Attorney "power exists only as to those health care decisions for which you are unable to give informed consent." Provide a copy to your Health Care Agents, health care providers, doctors, hospitals, rehabilitation and nursing home facilities. As long as you are of sound mind, you may withdraw your Health Care Power of Attorney document in writing or change the document. If you consider withdrawing or changing a Health Care Power of Attorney document, you should consult with a private attorney or Legal Aid's office in the area where you reside. If the withdrawal or change takes place, you should notify all that hold a copy of the original document or know where the original is kept. Notify the original named Health Care Agents as to any changes in the document; especially if they are not to serve on your behalf as a Health Care Agent.