## Limited Power of Attorney to Act for Sole Proprietor

## NOTICE

THE PURPOSE OF THIS POWER OF ATTORNEY IS TO AUTHORIZE THE PERSON YOU DESIGNATE (YOUR "AGENT") BROAD POWERS TO HANDLE THE SOLE PROPRIETORSHIP'S BUSINESS ACCOUNTS AT MERCK, SHARP & DOHME FEDERAL CREDIT UNION, WITHOUT ADVANCE NOTICE TO YOU OR APPROVAL BY YOU.

## THE POWERS AND DUTIES OF AN AGENT UNDER A POWER OF ATTORNEY ARE EXPLAINED MORE FULLY IN 20 PA.C.S. CH. 56.

I HAVE READ OR HAD EXPLAINED TO ME THIS NOTICE AND I UNDERSTAND ITS CONTENTS.

Signature of Principal Date

I, \_\_\_\_\_\_, having an address of

and	doi	ng business as an unincorporated business owned entirely by me a	and operated under the Trade Name
of			, have made, constituted and

appointed:

Agent:			
Address:			
City:	Stat	e:Zip:	

## Limited Power of Attorney to act for Sole Proprietor with respect to Banking and Financial Transactions with Merck Sharp & Dohme Federal Credit Union ("Credit Union" or "MSDFCU")

My Agent, in my name, place and stead, is authorized to engage in banking and financial transactions of my Sole Proprietorship. Each and every power herein conferred upon said Agent, in the name of the undersigned either to perform any act or to execute, seal, and deliver any negotiable instrument or other document is also hereby conferred on said Agent to do and perform the same in the Trade Name in which the undersigned is conducting business as a sole proprietor.

I hereby authorize and direct the Credit Union to receive, accept, pay, and/or apply without limit as to amount, without regard to the application thereof or the proceeds thereof, any draft, check or instrument for the payment of money, drawn by the Agent on or made payable by the Agent from any account or accounts, including drafts, checks or instruments for the payment of money payable or endorsed to the order of the Agent (or any of my agents who are named in this or any other Limited Power of Attorney to Act for Sole Proprietor) or payable or endorsed in any other manner, which may be deposited with, or delivered or transferred to the Credit Union, or otherwise for the personal credit or account of, or in payment of the individual obligation of the Agent (or any of my agents who are named in this or any other Limited Power of Attorney to Act for Sole Proprietor) to the Credit Union, or otherwise for the personal credit or account of, or in payment of the individual obligation of the Agent (or any of my agents who are named in this or any other Limited Power of Attorney to Act for Sole Proprietor) to the Credit Union or others. I hereby ratify and confirm all previous acts of Agent with the same force and effects as if such acts had been done after the execution and delivery of this Power of Attorney.

This authority shall remain in effect unless and until revoked or modified by me, in writing, duly signed and received by the Credit Union. IN WITNESS WHEREOF I have caused the power of attorney to be duly executed this

\_\_\_\_\_ day of \_\_\_\_\_\_, \_\_\_\_\_.

Witness	Signature of Sole Proprietor
Witness	Typed Name of Sole Proprietor
STATE OF COUNTY OF	
	before me appeared
My Commission ovniros:	Notary Signature
My Commission expires:	
I,, have read	d the attached power of attorney and am the person indentified as an Agent
for the Principal. I hereby acknowledge that in the abservation PA.C.S. When I act as agent:	ence of a specific provision to the contrary in the power of attorney or in 20
I shall exercise the powers for the benefit of the Princip I shall keep the assets of the Principal separate from my I shall exercise reasonable caution and prudence. I shall keep a full and accurate record of all actions, reco	y assets.
Witness	Signature of Agent (Date)
Witness	
STATE OF	
On this day of,, and State, the above-named, person whose name is subscribed to the above reference for the purposes therein contained. IN WITNESS WHEREOF, I hereunto set my hand and official of	personally appeared before me, a Notary Public in and for the said County , known to me (or satisfactorily proven) to be the ced Acknowledgment by Agent, and affirmed that he/she executed the same icial seal
	Notary Signature

This credit union is federally insured by the National Credit Union Administration. Equal Opportunity Lender. Merck Sharp & Dohme Federal Credit Union. 01/15