Date: [Insert Date]

To: [Name of Attorney-in-Fact/Agent]
[Address]
[City, State, Zip Code]

Subject: Instructions Regarding Execution of Durable Power of Attorney

Dear [Name of Agent],

I am writing to formally provide you with instructions regarding the Durable Power of Attorney document I have executed, in which I have named you as my Attorney-in-Fact (Agent).

1. Purpose of the Document
This document grants you the legal authority to manage my financial affairs and property should I become incapacitated or unable to manage them myself. Your authority is "durable," meaning it remains in effect even if I become mentally or physically incompetent.

2. When to Act
[Select one option:]
- This power is effective immediately.
- This power only becomes effective upon a written determination by my attending physician that I am incapacitated.

3. Fiduciary Duty
As my Agent, you are legally required to act in my best interest, keep my assets separate from your own, and maintain accurate records of all transactions made on my behalf.

4. Specific Instructions and Limitations
[Insert specific instructions, such as: "Please ensure my mortgage is paid first," "Do not sell my primary residence unless necessary for care," or "Consult with my accountant before major asset liquidation."]

5. Location of Original Documents
The original signed and notarized Durable Power of Attorney is located at: [Insert Location, e.g., Safe Deposit Box, Attorney's Office, or Home Safe].

6. Notification
Upon the need to exercise this power, please notify the following individuals/institutions:
- [Bank Name and Contact]
- [Legal Counsel Name and Contact]
- [Family Member Name and Contact]

Please sign a copy of this letter to acknowledge that you have received these instructions and understand your role and responsibilities.

Sincerely,

[Your Signature]
[Your Printed Name]

Acknowledgment:

I, [Name of Agent], acknowledge receipt of these instructions and accept the appointment as Attorney-in-Fact.

Signature: _____ Date: _____