

KENTUCKY LIMITED POWER OF ATTORNEY

I, _____ whose address is _____

_____, hereby
appoint _____, my true and lawful agent and
attorney in fact to act in my name and behalf for the following specific acts:

- 1. _____

- 2. _____

This Limited Power of Attorney shall remain in full force and effect until revoked by either party in writing.

IN WITNESS WHEREOF, this _____ day of _____,
20____.

Witnesses:

Address:

Pursuant to Kentucky Revised Statutes Chapter 386.

