Nelnet Bank 13907 S. Minuteman Dr. Ste. 250 Draper, UT 84020



 $\frac{Monday\ through\ Friday\ 8:30\ am-5:00\ pm\ MST}{\underline{Deposits@nelnetbank.com}\ |\ 800.446.4190\ |\ nelnetbank.com}$ 

## **NELNET BANK**

## POWER OF ATTORNEY – AFFIDAVIT OF INDEMNIFICATION AND HOLD HARMLESS

This document is not valid unless signed by the Principal or Attorney-in-Fact and notarized, and a true and correct copy of the original Power of Attorney has been provided.

I, the Principal or Attorney-in-Fact (collectively, "Agent"), being duly sworn, do hereby declare under penalties of perjury that the attached Power of Attorney/Durable Power of Attorney (the "POA") is in full force and effect, and I affirm that:

- I am the designated POA as an attorney-in-fact for Principal who is not deceased and was competent and not under any undue influence or duress at the time of the POA's execution;
- I am authorized to conduct all activities in and relating to the Account referenced below (the "Account") on behalf of Principal, including the authorization to sign federal tax forms, and no instruction from me relating to the Account will be prohibited by the POA, the Account terms and conditions or any applicable laws;
- The POA has not been partially or completely revoked, terminated or suspended by Principal or through a legal proceeding, and I will promptly notify you of any revocation, termination or suspension of the POA or my authority thereunder or if the Principal becomes deceased;
- No guardian has been appointed over Principal and no petition for guardianship is pending;
- I certify that I am fully authorized to act independently of any other attorneys-in-fact named in the POA;
- I understand that if you receive conflicting instructions from me and another attorney-infact and/or Principal relating to the Account, or instruction from any regulatory authorities, that you may restrict some or all transactions in the Account until you have received, in your sole discretion, satisfactory written resolutions of the conflict or issue, as applicable;
- I understand that you may restrict my ability as Agent to disburse funds or securities from the Account(s) if they reasonably believe that financial exploitation of the Principal or Agent has occurred, is occurring, has been attempted or will be attempted.

To induce Nelnet Bank to accept the Power of Attorney, with full knowledge that Nelnet Bank will rely on this Affidavit, I, the Agent, hereby agree that Nelnet Bank, having received a duly executed true and correct copy of the original Power of Attorney, may rely on the validity of the Power of Attorney until Nelnet Bank receives written notice of revocation or termination of the Power of Attorney and has had a reasonable amount of time to act upon such notice. I, for myself and for my heirs, executors, administrators, successors and assigns, hereby agree to indemnify

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and hold harmless Nelnet Bank, their successors, whether by merger, consolidation or otherwise, and assigns, harmless for any losses, liability, claims and costs (including reasonable attorney's fees) resulting from any actions, transactions, withdrawals or transfers made in accordance with my instructions or my failure to provide instructions as Agent. Account Owner Name Account Number(s) to which this Affidavit applies By signing below, I agree to be bound by the terms and conditions contained in this Affidavit and the Personal Account Deposit Account Agreement which controls the account for which I am attorney-in-fact. Signature of Principal or Attorney-in-fact Date Notary: State of \_\_\_\_\_ County of On \_\_\_\_\_\_, before me, \_\_\_\_\_\_, personally \_\_\_\_\_, personally known to me or proved to me on appeared, the basis of satisfactory evidence to be the person whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her capacity, and that by his/her signature on the instrument the person upon behalf of which the person acted, executed the instrument. My commission expires \_\_\_\_\_ Notary seal/stamp: