## AFFIDAVIT for POWER OF ATTORNEY

l,	("Agent") an	n the duly authorized attorney-in-fact for
		forth in an original fully executed Power
of Attorney dated		
I hereby testify that the said Power of hereinbelow.	of Attorney remains in full for	rce and effect as of the date shown
I further testify that the Principal has shown hereinbelow.	not withdrawn or altered sa	id Power of Attorney as of the date
I further testify that the Power of Atto	orney authorizes me to unde	ertake the following actions:
☐ Any and all actions required in ord☐ SALE ☐ REFINANCE of property	known as	ated real estate transaction, that being a
□Other:		
SIGNATURE OF AGENT:		
	Agent	Dated
STATE OF NEW JERSEY		
COUNTY OF		
I certify that on, 20 and acknowledged under oath, to my sa		personally appeared before me
a. Is the person named in and who	o executed the attached instrur	ment; and
b. That this person signed the inst		
	 Notary Public	
	My Commiss	