MOW 3011-1.4 (12/10)

UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF MISSOURI

In Re:	)	
	)	Case No.
Debtor(s)	)	

LIMITED POWER OF ATTORNEY

To: (name address of agent/attorney-in-fact)

The undersigned claimant hereby authorized you to act as attorney-in-fact for the undersigned only to collect uncollected, undistributed, or unclaimed funds held by the court and owing to _____(name of claimant) in the amount of $_____.

Dated: Signature: _____
Name: _____
Address: _____
_____
Telephone: _____
Social Security Number: XXX-XX-_____

Acknowledged before me on the _____ day of _____, 20_____, by _____, who says that he/she is the person named above and is authorized to execute this power of attorney.

Signature_____
Notary Public