

SPECIAL/LIMITED POWER OF ATTORNEY

Notice to Person Executing Special/Limited Power of Attorney

The authority granted by this Special/Limited Power of Attorney is limited to matters relating to the Alameda County Employees' Retirement Association (ACERA). The person designated as your agent in this Power of Attorney (or attorney in fact) does not have any authority over your other real or personal property. If you wish that your agent (attorney in fact) have authority over your real and/or personal property, it is recommended that you seek independent legal counsel and prepare a general power of attorney.

You will notice the language contained in the following (Warning) statement refers to a more extensive authority than granted by this Power of Attorney. This (Warning) statement is required by Probate Code Sec. 4128 and must be included in all preprinted durable power of attorney forms even though the ACERA Special/Limited Power of Attorney does not authorize your agent (attorney in fact) to do many of things mentioned in the following (Warning) statement. Also, if you are concerned with the (Warning) statement or the extent of the authority being granted by the ACERA Special/Limited Power of Attorney form, we again urge you to consult with your own independent attorney.

(Warning): Notice to Person Executing Durable Power of Attorney

A durable power of attorney is an important legal document. By signing a durable power of attorney, you are authorizing another person to act for you, the principal. Before you sign this durable power of attorney, you should know these important facts:

- Your agent (attorney-in-fact) has no duty to act unless you and your agent agree otherwise in writing.
- This document gives your agent the powers to manage, dispose of, sell, and convey your real and personal property, and to use your property as security if your agent borrows money on your behalf. This document does not give your agent the power to accept or receive any of your property, in trust or otherwise, as a gift, unless you specifically authorize the agent to accept or receive a gift.
- Your agent will have the right to receive reasonable payment for services provided under this durable power of attorney unless you state otherwise in this power of attorney.
- The powers you give your agent will continue to exist for your entire lifetime, unless you state that the durable power of attorney will last for a shorter period of time or unless you otherwise terminate the durable power of attorney. The powers you give your agent in this durable power of attorney will continue to exist even if you can no longer make your own decisions regarding the management of your property.
- You can amend or change this durable power of attorney only by executing a new durable power of attorney or by executing an amendment through the same formalities as an original. You have the right to revoke or terminate this power of attorney at any time as long as you are competent.
- This durable power of attorney must be dated and must be acknowledged before a notary public or signed by two witnesses. If it is signed by two witnesses, they must witness either (1) the principal's signing of the power of attorney or (2) the principal's acknowledgement of his or her signature. A durable power of attorney that may affect real property should be acknowledged before a notary public so that it can easily be recorded.

- You should read this durable power of attorney carefully. When effective, this durable power of attorney will give your agent the right to deal with property that you now have or might acquire in the future. This durable power of attorney is important to you. If you do not understand the durable power of attorney or any provision of it, you should obtain the assistance of an attorney or other qualified person.

SPECIAL/LIMITED POWER OF ATTORNEY

I, _____, a member of the Alameda County Employees’

Retirement Association (ACERA), appoint _____ as my agent (attorney-in-fact) to act for me in any lawful way with respect to transactions concerning my interest in any and all benefits payable by ACERA.

(Optional) In case my agent provides a written notarized statement that he or she cannot or is unwilling or unable to act, I appoint _____ as alternate agent.

Notice to Person Accepting the Appointment of Attorney-in-Fact

By acting or agreeing to act as the agent (attorney-in-fact) under this power of attorney you assume the fiduciary and other legal responsibilities of an agent. These responsibilities include:

- The legal duty to act solely in the interest of the principal and to avoid conflicts of interest.
- The legal duty to keep the principal’s property separate and distinct from any other property owned or controlled by you.

You may not transfer the principal’s property to yourself without full and adequate consideration or accept a gift of the principal’s property unless this power of attorney specifically authorized you to transfer property to yourself or accept a gift of the principal’s property. If you transfer the principal’s property to yourself without specific authorization in the power of attorney, you may be prosecuted for fraud and/or embezzlement. If the principal is 65 years of age or older at the time the property is transferred to you without authority, you may also be prosecuted for elder abuse under Penal Code Section 368. In addition to criminal prosecution, you may also be sued in civil court.

I have read the foregoing notice and I understand the legal and fiduciary duties that I assume by acting or agreeing to act as the agent (attorney-in-fact) under the terms of this power of attorney. Lastly, the principal's benefit shall not be subject to execution, process, or assignment under the County Employees' Retirement Law Code Section 31452.

ACERA may act under this power of attorney on receipt of an original or a copy. Revocation of this power of attorney will not be effective as to ACERA until ACERA receives legally sufficient written notice of the revocation. I agree to indemnify ACERA for any claims that arise against ACERA because of reliance on this power of attorney before receipt of written notice of a revocation.

Check (1) or (2):

- (1) This power of attorney is effective immediately.
- (2) This power of attorney is effective only if and when (check (a) or (b)):

 - (a) I become incapacitated. I define incapacitated to mean: _____
_____.
 - (b) (Indicate date or event): _____
_____.

Check (1) or (2):

- (1) This power of attorney will continue to be effective even though I become incapacitated.
- (2) This power of attorney will terminate if I become incapacitated.

Check all that apply:

- (1) This power of attorney **will** authorize my agent to designate or change the designation of beneficiaries to receive any property, benefit, or contract right under ACERA on my death.
- (2) This power of attorney **will not** authorize my agent to designate or change the designation of beneficiaries to receive any property, benefit, or contract right under ACERA on my death.
- (4) This power of attorney **will** authorize my agent to appoint himself or herself as beneficiary.
- (5) This power of attorney **will not** authorize my agent to appoint himself or herself as beneficiary.

My address is: _____

My social security number is: _____

My agent's address is: _____

My alternate agent's address is: _____

Date: _____

Signature

(Notary public acknowledgement attached.)

California All-Purpose Acknowledgement*

State of California }
County of _____ }

On _____ before me, _____,
Date Name and Title of the Officer
personally appeared _____
Name(s) of Signer(s)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Place Notary Seal Above

Signature _____
Signature of Notary Public

Optional

Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

Description of Attached Document

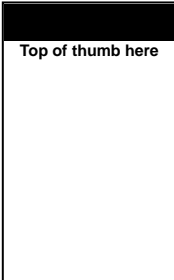
Title of Type of Document: _____

Document Date: _____ Number of Pages: _____

Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

- Signer(s) Name:
Individual
Corporate Officer — Title(s):
Partner — Limited General
Attorney in Fact
Trustee
Guardian or Conservator
Other: _____



Signer Is Representing: _____

- Signer(s) Name:
Individual
Corporate Officer — Title(s):
Partner — Limited General
Attorney in Fact
Trustee
Guardian or Conservator
Other: _____



Signer Is Representing: _____

* As provided by California Civil Code § 1189. (a) (1)