

NSTRUCTIONS

Use this form if you wish to authorize a trusted person to manage your TRSL affairs on your behalf.

To establish a new power of attorney, complete all three sections. Print in ink or type all entries except signatures. You, the principal, must sign section 2 in ink before a Notary Public. TRSL cannot accept a Form 02-15PA in which your agent signs section 2 on your behalf. Your agent must sign section 3 in ink before a Notary Public.

If you wish to submit an existing power of attorney instead, TRSL must receive either an original, or a true copy, or a certified copy of the existing power of attorney. In this case, complete sections 1 and 3, leaving section 2 blank. Your agent must sign section 3 in ink before a Notary Public. Your trusted person cannot accept the appointment before you appoint him or her as your agent.

It is advisable to verify commission of your Notary Public before signing the forms.

FREQUENTLY ASKED QUESTIONS

What is a true copy of a power of attorney?

A true copy is a copy certified by the same notary public before whom it was originally executed.

What is a certified copy of a power of attorney?

A certified copy is a copy that is certified by a clerk of court when you file the original with the court.

What if I want to appoint more than one agent?

If you want to appoint more than one agent, separate forms must be submitted for each agent. In this case, each agent will be authorized to act independently from other agents.

May I sign documents and conduct TRSL business myself if I have appointed an agent?

You may sign TRSL documents yourself even after appointing an agent.

May I revoke a power of attorney?

You may revoke a power of attorney in writing. However, a new power of attorney does not automatically revoke previous ones.



Power of Attorney and Agent's Affidavit of Acceptance



HOW TO SUBMIT:

DROP OFF or MAIL

8401 United Plaza Blvd, Ste 300 Baton Rouge LA 70809

Submit ORIGINAL form ONLY. <u>No copie</u>s, faxes, or scans accepted.

Section 1 - Retiree/Member/B Name: Last, first, MI, suffix (Jr., III, etc.)		Social Security number (###-##-####)	
Section 2 - Affidavit designat	ing new power of attorney		
State of	Parish/County o	ıf	
		"	
	, a resident of		
		, as his/her agent and attorney-in-fact to act in his/her name, place, and stead in	
		ess, concerns, and matters relative to payments disbursed to him/her by	
the Teachers' Retirement System of Louis	-		
Principal's signature (DO NOT PRINT OR TYPE)		Daytime telephone (include area code)	
Notary Public indentification/Bar roll number Section 3 - Agent's affidavit a		-	
State of	Parish/County of		
BEFORE ME, the undersigned authority, personally came and appeared		, who accepts the authority given	
in the power of attorney for the above-na	med Principal, understands that this pow	er of attorney ceases at the death of the Principal, and accepts full	
responsibility for notifying TRSL of the dea	th of the Principal and returning any chee	cks to TRSL that were received after the death of the Principal.	
Agent's name: Last, first, MI, suffix (Jr., III, etc.)		Agent's Social Security number (###-##-#####)	
Street / PO box		City, state, zip	
Daytime telephone (include area code)	Email address	Relationship to Principal	
Agent's signature (DO NOT PRINT OR TYPE)		Date signed (mm/dd/yyyy)	
SWORN TO AND SUBSCRIBED before me, I	Notary Public in and for the parish/county	y and state aforesaid, this day of, 20,	