

**AFFIDAVIT OF NON-REVOCATION/NON-TERMINATION  
OF POWER OF ATTORNEY**

Pursuant to N.J.S.A. 46:2B-8.5c&-6b (Revised Durable Power of Attorney Act, P.L. 2000, c.109)

State of New Jersey, County of \_\_\_\_\_, ss.:

\_\_\_\_\_, being of full age, and duly sworn according to law, deposes and says:

1. I am the Attorney-in-fact for \_\_\_\_\_, hereinafter referred to as PRINCIPAL, by virtue of a certain Power of Attorney dated on \_\_\_\_\_, and recorded in the Office of the Clerk/Register of \_\_\_\_\_ County, in Deed Book \_\_\_\_\_ . Page \_\_\_\_\_, which Power of Attorney vests me with the authority to act for PRINCIPAL for all purposes set forth therein, including, without limitation, the execution and delivery of the document to which this Affidavit is attached. [The said Power of Attorney is a Durable Power of Attorney.]

2. To the best of my knowledge and belief, the said Power of Attorney has not been revoked or terminated by an act of PRINCIPAL or by the death, disability or incapacity of PRINCIPAL. PRINCIPAL has not been judicially declared to be incompetent.

3. This Affidavit is made pursuant to the provisions of the statute cited above.

Sworn and subscribed before me this  
\_\_\_\_\_ day of \_\_\_\_\_,

\_\_\_\_\_  
@, Attorney-in-Fact for @