

ATTACHMENT H

SPECIAL POWER OF ATTORNEY

Lease 760:0530

Broward County Motorist Service Center

Department of Highway Safety and Motor Vehicles

Amended: October 13, 2010

**ITN ATTACHMENT H
SPECIAL POWER OF ATTORNEY
LEASE 760:0530**

I, _____, _____,
Name Street Address
_____, _____, appoint _____,
City, State Zip Code Name
_____, _____, _____,
Street Address City, State Zip
Code

as my attorney in fact to act in my capacity to do any and all of the following:

Any acts necessary regarding the entering of a bid for Lease Agreement No. 760:0530

with the State of Florida, Department of Highway Safety and Motor Vehicles,
_____ Program,

for the Building at _____, _____, FL
Street Address City
_____, title to said property being held by _____.
Zip Code Name

The rights, powers, and authority of my attorney in fact to exercise any and all of the rights and powers granted shall remain in full force and effect until this Power of Attorney is revoked by me or, the herein above Lease is awarded by the Department of Highway Safety and Motor Vehicles.

DATED this _____ day of _____, 20_____.

Signature

STATE OF FLORIDA
COUNTY OF _____

PERSONALLY APPEARED BEFORE ME, the undersigned authority, _____,
Name

personally known to me, who, after first being sworn by me, affixed his/her signature in the

space provided above this _____ day of _____, 20_____.

(SEAL)
Notary Public

Printed Name of Notary Public

My Commission Expires: