

Power of Attorney

NOW ALL MEN BY THESE PRESENTS, that I,		_ being 18 years of age, or over, being a member of	
Ardent Credit Union maintaining Member No.	, Account No	, with the Ardent Credit Union, do hereby	

make, constitute and appoint ______, whose signature appears below, to be my true and lawful agent/attorney, for me and in my name to ask, demand and receive from the said credit union from time-to-time and at any and all times any or all monies standing to my credit in the above account and/or certificate with said credit union, and upon receipt thereof, or any part thereof, to execute and deliver to the said credit union good and sufficient receipts or acquittances for the same; and further to endorse checks or drafts payable to me or to my order and to receive from the said credit union all or any part of the proceeds thereof in cash or otherwise.

It is understood and agreed that this power shall stand irrevoked and in full force and effect until I shall give, and the said credit union shall have received, written notice of the termination hereof, and shall not be terminated by my disability or incompetence.

NOTICE

THE PURPOSE OF THIS POWER OF ATTORNEY IS TO GIVE THE PERSON YOU DESIGNATE (YOUR "AGENT") BROAD POWERS TO HANDLE YOUR PROPERTY, WHICH MAY INCLUDE POWERS TO SELL OR OTHERWISE DISPOSE OF ANY REAL OR PERSONAL PROPERTY WITHOUT ADVANCE NOTICE TO YOU OR APPROVAL BY YOU.

THIS POWER OF ATTORNEY DOES NOT IMPOSE A DUTY ON YOUR AGENT TO EXERCISE GRANTED POWERS, BUT WHEN POWERS ARE EXERCISED, YOUR AGENT MUST USE DUE CARE TO ACT FOR YOUR BENEFIT AND IN ACCORDANCE WITH THIS POWER OF ATTORNEY.

YOUR AGENT MAY EXERCISE THE POWERS GIVEN HERE THROUGHOUT YOUR LIFETIME, EVEN AFTER YOU BECOME INCAPACITATED, UNLESS YOU EXPRESSLY LIMIT THE DURATION OF THESE POWERS OR YOU REVOKE THESE POWERS OR A COURT ACTING ON YOUR BEHALF TERMINATES YOUR AGENT'S AUTHORITY.

YOUR AGENT MUST KEEP YOUR FUNDS SEPARATE FROM YOUR AGENT'S FUNDS. A COURT CAN TAKE AWAY THE POWERS OF YOUR AGENT IF IT FINDS YOUR AGENT IS NOT ACTING PROPERLY. THE POWERS AND DUTIES OF AN AGENT UNDER A POWER OF ATTORNEY ARE EXPLAINED MORE FULLY IN 20 PA.C.S. CH. 56. IF THERE IS ANYTHING ABOUT THIS FORM THAT YOU DO NOT UNDERSTAND, YOU SHOULD ASK A LAWYER OF YOUR OWN CHOOSING TO EXPLAIN IT TO YOU.

I HAVE READ OR HAD EXPLAINED TO ME THIS NOTICE AND I UNDERSTAND ITS CONTENTS. IN WITNESS WHEREOF, intending to be legally bound

hereby, I have hereunto set		
my hand and seal this day of 2		Member granting Power-of-Attorney
COMMONWEALTH OF PENNSYLVANIA:)	Signature of i	
)SS		
COUNTY OF:)		
On this day of 20	_, before me, a Notary Public, came	known to me to
be the member described in and who executed the fo	pregoing power, and duly acknowledged to me that he	/she executed the same.
	Nota	ary Public
O	Ardent Credit Union and to any future amendments th	Power above hereof Signature
of Member granting Power-of-Attorney	Signature of Agent (must sign Age	nt's Acknowledgement of reverse side)
	REVOCATION OF POWER OF ATTORNEY	
I,, being a n	nember of the Ardent Credit Union maintaining Membe	r No, hereby revoke

Witness Signature

Member's Signature

Witness Signature

Power of Attorney



ACKNOWLEDGEMENT BY AGENT/ATTORNEY-IN-FACT

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COMMONWEALTH OF PENNSYLVANIA)) SS
COUNTY OF	:)

The undersigned, _______ in accordance with the provisions of 20 Pa. C.S. Section 5606, being duly sworn or affirmed (Agent/Attorney-in-fact)

according to law, does hereby depose and say that:

1. The undersigned is the named Agent/Attorney-in-Fact under and by virtue of a certain Power of Attorney dated ______, and executed by

____ as Principal (hereinafter referred to as "Principal").

(Member granting Power-of-Attorney/Principal's name)

2. On or about ______, the undersigned presented said Power of Attorney (Power) to Ardent Credit union ("Credit Union") and has requested (date)

Credit Union to honor any and all actions and requests done or made by the undersigned as Agent/Attorney-in-Fact on behalf of Principal under the said Power of Attorney.

3. At the time of exercise of the Power of Attorney, the undersigned did not have actual knowledge of the termination of Power by revocation, death, or if applicable, disability or incapacity or divorce, and that, if applicable, the specified future time or contingency for the Power to become effective has occurred. These representations shall be deemed continuing, and each act in the undersigned in the apparent capacity of Agent/Attorney-in-Fact shall be a representation to the same effect unless and until the Credit Union shall have actually received from the undersigned written notice to the contrary. The undersigned (and if more than one, jointly and severally) hereby agrees to indemnify and hold harmless the Credit Union against any claims, defenses, loss, costs, liability or expense (including reasonable counsel fees) which Credit Union may suffer or incur as a result of its reliance on said Power of Attorney, and this indemnification and hold harmless agreement shall survive the revocation of the power, any resignation by the undersigned as Agent/Attorney-in-Fact, and the termination of any or all documents or other relationships with the Credit Union.

4. The indemnification and hold harmless Agreement set forth in this Affidavit shall be binding on the Agent(s)/Attorney-in-Fact(s), their successors a set forth in the Power of Attorney or their appointed successors, if the Power of Attorney provides for such appointments.

5. The undersigned Agent/Attorney-in-Fact shall give prompt notice to the Credit Union of the appointment of a Successor Agent/Attorney-in-fact or the appointment of a successor Agent/Attorney-in-Fact which shall be by Power of Attorney.

6 AGENT'S ACKNOWLEDGMENT: I have read the attached power of attorney and am the person identified as the Agent/Attorney-in-Fact for the principal. I hereby acknowledge that in the absence of a specific provision to the contrary in the power of attorney or in 20 Pa-C.S. when I act as Agent/Attorney-in-Fact:

I shall exercise the powers for the benefit of the principal.

I shall keep the assets of the principal separate from my assets.

I shall exercise reasonable caution and prudence.

I shall keep a full and accurate record of all actions, receipts and disbursements on behalf of the principal.

0__

Signature of Agent/Attorney-in-fact

Sworn to and subscribed before me this

_____ day of ______, 20_____,

NOTARY PUBLIC

Print Name