LARRY E. CIESLA

POWER OF ATTORNEY AND DESIGNATION FOR TEMPORARY CUSTODY

THIS POWER OF ATTO	RNEY AND DESIGNATION	N FOR TEMPORARY CUS	TODY is entered	d into on the
day of, 2	0, by	, as the parent, cu	ustodian and leg	gal guardian of
the minor child known as	, v	whose date of birth is $__/$	′/ I here	by appoint my
In connec	ction with granting tem	porary custody of my		_1
, to my		, I hereby app	oint my	
, as my true	and lawful attorney-in	-fact and agent, with full	power and aut	hority to act in
my place and stead with resp	ect to each of the follow	wing powers:		
	thdraw my child from a	ny school or other educa	itional institutio	n.
		all medical, dental, hospi	_	•
		eatment, procedure, surg	•	•
To communica	ite with and exchange i	nformation with and all _ا	public or private	e school
		ducation, safety, health a		•
		ermissions, consents, aut		
		ipate in any and all even		
To employ, ret	ain or discharge any pe	rson who may care for, co	ounsel, treat or	in any manner
assist my son.				
		may exercise with respec		
		retion to exercise the sa		attorney-in-
*		y attorney-in-fact in her o		
•	other acts necessary or	incidental to the execut	ion of the powe	rs enumerated
herein.				
		ch I could do as parent, c	ustodian and le	gal guardian
	if I were personally p			
		-in-fact full power and a		•
and every act and thing what		-	-	
to all intents and purposes, a		* *	-	
revocation, hereby ratifying a		my said attorney or my sa	aid attorney's su	ubstitute shall
lawfully do or cause to be do	-			1.1
		atural		
I am empowered on behalf o				
treatments, procedures and				
such examinations, treatmen			-	idering such
examinations, treatments, pro				.: b
The state of the s		fact shall be binding upo		
ries, personal representatives	_	~		•
any time, however, any party			this Power of A	ittorney until
receipt of a copy of a revocat			a a viole a la count	avaave of this
* * *	or this signed original s	shall be deemed to be ar	i original counte	erpart of this
Power of Attorney.	DNIEV AND DECIGNATIO	N FOR TEMPORARY CUS	TODV chall rom	ain in full force
and effect until revoked by m		INTONTLINIFUNANT CUS	TODE SHAILTEIN	ani ni run iorce
and effect until revoked by II	ie in willing.			

LARRY E. CIESLA

POWER OF ATTORNEY AND DESIGNATION FOR TEMPORARY CUSTODY

IN WITNE	ESS WHEREOF, I have hereunto se	et my hand and seal this	day of,
_			
STATE OF FLORI	DA)		
COUNTY OF ALA	ACHUA)		
aforesaid, to tak person describe	CERTIFY that on this day, before te acknowledgements, personall ted in and who executed the fore te same, and she did not take an	y appeared going instrument and she ad	, to me known to be the
, 2	5 my hand and official seal in the 20 I hereby certify that the ac edge/identification consisting of	knowledgement of the fore	
•			
		Name:	 -
		Notary Public	
		State of Florida at Large	
		My Commission Expires:	
		Commission No.:	