THIS GENERAL POWER OF ATTORNEY

Is given on the $\overline{\mathcal{L}}$ day of $\overline{\mathcal{L}}$, year $\overline{\mathcal{L}}$	2008
BY SAEEDA SULTANA	
IAPPOINT SYED BABAR	

Jointly / jointly and severally

To be my attorney (s) in accordance with the Powers of Attorney Act to do on my behalf anything that I can lawfully do by an attorney and particularly the following acts, the enumeration of which is not in any to way limit the general powers herein conferred, namely:

- a) To purchase, sell, make, draw, accept, endorse, discount, transfer, renew, negotiate and in every way deal with cheques, bills of exchange, promissory notes, deposit receipts, bonds, debentures, coupons and every kind of negotiable instrument and security;
- b) To subscribe for, accept, purchase, sell, pledge, transfer, surrender and in every way deal with shares, stocks, bonds, debentures and coupons of every kind and description and to vote and act in respect thereof;
- To receive and collect rents, dividends, bonuses, profits, interest, commission, fees, salaries, debts and claims of every kind and to give receipts, and discharges therefore and to distrain for rent and interest;
- d) To purchase, sell, rent, exchange, mortgage, charge, lease, surrender, manage, and in every way deal with real estate and any interest herein including any right of possession in a matrimonial home under Part II of the Family Law Act, and execute and deliver deeds, transfers, mortgages, charges, leases, assignments, surrenders, releases, consents, and other instruments required for any such purpose;
- e) To take, assume, purchase, discharge, assign, pledge and in every way deal with mortgages of real and personal property and to execute all powers of sale and other powers therein;
- f) To conduct any business operations.

In accordance with the Powers of Attorney Act, I declare that, this power of attorney may be exercised during any subsequent legal incapacity on my part.

In accordance with the Powers of Attorney Act, I declare that, after due consideration, I am satisfied that the authority conferred on the attorney named in this power of attorney is adequate to provide for the competent and effectual management of all my estate in case I should become a patient in a psychiatric facility and be certified as not competent to manage my estate under the Mental Health Act. I therefore direct that in that even, the attorney named in this power of attorney may retain this power of attorney for the management of my estate by complying with subsection 56 (2) of the Mental Health Act and in that case the Public Trustee shall not become committee of my estate as would otherwise be the case under clauses 56 (1) and (b) of that Act.

Any power of attorney or other designation of authority to an agent heretofore given by me is hereby revoked.

This power of attorney is subject to the following con	ditions and restrictions: -	. /	
This power of attorney is subject to the following con To pick up and segn for doc purchase of elle secile # I have signed this power of attorney in the presence 2nd day of april , year 2	umentation in 1890	rd to th	_Q
purchase of elle suite #	· /909 .		
I have signed this power of attorney in the presence	of both witnesses whose names app	ear below on the	2
2nd day of april , year 2	1008		
* Jaco D. Julian			•
[Grantor]			
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WITNESS BY:			
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Signature of witness	Signature of witness	*****	•
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Name of witness	Name of witness	Y (K) Or ()	•
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Note: Witness should not be the attorney or the attorney's spouse.