



60 Empire Drive • Suite 400  
Saint Paul Minnesota 55103  
800 657 3669 • fax 651 297 5999

**Mail the original, signed form to TRA.**

## Power of Attorney Cover Letter

To Whom It May Concern:

The power of attorney form dated \_\_\_\_\_ and executed with \_\_\_\_\_ as principal, and \_\_\_\_\_ as attorney-in-fact, has not been terminated and it remains in full force and effect.

In the event of the death of the principal or termination of the power of attorney, the Teachers Retirement Association will be promptly notified.

If the attorney-in-fact and principal are married, TRA will be promptly notified of marriage dissolution. If the power of attorney is nondurable, the Teachers Retirement Association will also be promptly notified of any judicial determination of incompetency of the principal.

_____	_____
Date	Signature of Attorney-in-Fact
	_____
	Address
	_____
	City, State, Zip Code
	_____
	Phone Number