Consult your Lawyer before signing this document. It has important legal consequences.

Power of Attorney

1. Grantor of the Power of Attorney, and address:	MACOIS AALVIIC
	0,386 G12015612 120 = mon
	STEVENSON INA 98648 & SE
2. Attorney, and address: Edward 12	2. Advik.
5042 CAL	IF AV SW
SEATTLE	WA 98136 2 12 DES
(The words Grantor and Attorney shall include a	all grantors and all attorneys under this Power of Attorney
3. Creation of the Power of Attorney	9.
	y as the true and lawful attorney in fact of the Grantor for the Purposes

The Grantor hereby appoints the Attorney as the true and lawful attorney in fact of the Grantor for the Purposes stated in this Power of Attorney. The Attorney is granted full power and authority to the extent permitted by law to do whatever is necessary to achieve the Purposes as the Grantor personally could do.

4. Purposes: All of the following purposes except those stricken are included in this Power of Attorney.

To strike out any purpose the Grantor must draw a line through the text of that subdivision AND initial within the brackets.

If any purposes are stricken, Grantor may wish to also strike out (M) all other matters.

(A) real	estate transactions;] <i>(I)</i>	personal relationships and affairs;[
(B) chat	tel and goods transactions;		benefits from military service;
	d, share and commodity transactions;[(K)	records, reports and statements;
(D) bank	king transactions;		full and unqualified authority to the Attorney
(E) busi	ness operating transactions;	i de	to delegate any or all of the foregoing powers
(F) insu	rance transactions;[j -	to any person or persons whom the Attorney
(G) estat	te transactions;[]	shall select:
	ns and litigation;	$\hat{\mathbf{j}} = (M)$	all other matters;

5. Substitution and Revocation (Delete if purpose [1.] is stricken.)

The Attorney shall have full power of sustitution and revocation. This means that the Attorney may appoint another to act under this Power of Attorney, and to revoke that appointment.

6. Durable Power

This Power of Attorney shall not be affected by the subsequent disability or incompetence of the Grantor.

7. Springing Power (If this space is left empty this Power of Attorney will not be a Springing Power of Attorney)

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8. Inducement of Third Parties to Act

Grantor agrees that any third party receiving a signed copy or reproduction of this Power of Attorney may act under it. Revocation or termination of this Power of Attorney will not be effective until the third party receives actual knowledge of the termination or revocation. Grantor shall hold harmless any third party from and against any claims that may arise against the third party as a result of reliance on this Power of Attorney.

In Witness Whereof, Grantor has signed this Power on December! 1989
In the presence of:
Victor Synn Jensen of 16 Box 238 Stevenson Was 9864.
of Co Box 238 Atevenier less 9864. Signature Of Co Box 238 Atevenier less 9864. Of Long 1994 Con to 100. 9861.
STATE OF Manuelle County of Chamania ss.
On Dietim Ale 7 / 1989 before me, the subscriber, personally appeared
to me personally known, and known to me to be the same person described in and who executed the foregoing Power of Attorney, and he acknowledged to me that he executed the same.
Suffering in Experis 1/1/93
Affidavit that Power of Attorney is in Full Force
STATE OF COUNTY OF SS.:
being duly sworn, deposes and says: 1. The Grantor within did, in writing, appoint me as the Grantor's true and lawful attorney in fact in the within Power of Attorney.
2. As Attorney for the Grantor and pursuant to the Power of Attorney, I have executed the following Instrument(s):
3. At the time I executed the Instrument(s) I had no actual knowledge or actual notice of revocation or termination of the Power of Attorney by death or otherwise, or knowledge of any facts indicating the same. I further represent that the Grantor is alive, has not revoked or repudiated the Power of Attorney and the Power of Attorney still is in full force and effect. 4. I make this affidavit for the purpose of inducing
to accept delivery of the Instrument(s), as executed by me in my capacity as the Attorney of the Grantor, with full knowledge that this affidavit will be relied upon in accepting the execution and delivery of the Instrument(s) and in paying good and
valuable consideration therefor.
Sworn to before me on 19

If Grantor wishes the Power of Attorney to become effective only upon disability, and such Springing Power of Attorney is permitted in the jurisdiction, insert the following provision or other provision required in the jurisdiction:

This Power of Attorney shall become effective upon the disability of the Grantor whereby Grantor is unable to manage Grantor's property and affairs effectively. Such disability shall be deemed to exist and the Attorney may act pursuant to this Power of Attorney only after a licensed physician (you may give the name and address of a specific physician) has certified such disability in writing.