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Filed for record at the request of

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FILED FOR RECORD SKAMATTA CO WASH BY **AdminaTrollies** Oct 4 | 34 PM '02

J. MICHAEL GARVISON

# **DURABLE POWER OF ATTORNEY**

Washington, give Washin

#### 1. POWERS

- A. The agent shall act on my behalf and for my benefit, and shall have all powers over my estate that I have or acquire. These shall include, but not be limited to, the following: the power to make deposits to, and payments from, any account in my name in any financial institution; the power to open and remove items from any safe deposit box in my name; the power to sell, exchange or transfer title to stocks, bonds or other securities; the power to sell, convey or encumber any real or personal property.
- B. I specifically authorize the agent to revoke any community property agreement and to transfer any property to my spouse as a gift.
- C. If the agent believes I am likely to need long-term health care services, I specifically authorize the agent to make any gifts the agent believes I would have wished to make to expedite my eligibility for governmental payment for the cost of such services or to avoid or reduce any lien to recover the cost of such services.
- D. The agent shall have all powers over my person necessary or desirable to provide for my support, maintenance, health, or comfort, and shall have access to my medical records.

### 2. EFFECTIVE DATE AND REVOCATION

A. This power of attorney shall become effective immediately and shall remain in effect until revoked or until my death.

B. I may revoke this power of attorney by giving written notice to the agent and by recording the written instrument of revocation in my County Auditor's Office.

#### 3. RIGHTS AND DUTIES OF THE AGENT

- A. My estate shall hold the agent harmless from, and indemnify the agent for, all liability for acts done for me in good faith based on this power of attorney.
- B. The agent shall be required to account to any subsequently appointed personal representative.

## 4. NOMINATION OF GUARDIAN

I nominate the agent for considerzion by the court as my guardian or limited guardian in the event that any guardianship proceeding for my person or estate should be commenced.

On October 4, 2002, a person whom I know to be Doris Delbridge appeared before me in person, signed above, and acknowledged that the signing was done freely

Dated: 10/4/02

Dated: 10-4-02

Notary Public, State of Washington, residing at Cason

and voluntarily for the purposes mentioned above.

Commission expires: 2/23/03

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