

143779

BOOK 220 PAGE 628

## RETURN ADDRESS:

Randall Bandy  
5000 NE 72<sup>nd</sup> Ave #N90  
Vancouver, WA 98661

FILED FOR RECORD  
SKAMANIA CO. WASH  
BY *Mary Wilson*

FEB 15 3 15 PM '02

*Polany*  
AUDITOR

J. MICHAEL GARVISON

BOOK 238 PAGE 824

Please Print or Type Information.

## Document Title(s) or transactions contained therein:

1. Durable Power of Attorney
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

## GRANTOR(S) (Last name, first, then first name and initials)

1. Wanda Violet Bandy
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

☐ Additional Names on Page \_\_\_\_\_ of Document.

## GRANTEE(S) (Last name, first, then first name and initials)

1. Vickie Gail Hosey
2. LAVEDA FAYE VINSANT
3. \_\_\_\_\_
4. \_\_\_\_\_

☐ Additional Names on Page \_\_\_\_\_ of Document.

## LEGAL DESCRIPTION (Abbreviated: i.e., Lot, Block, Plat or Section Township, Range, Quarter/Quarter)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

☐ Complete Legal on Page \_\_\_\_\_ of Document.

## REFERENCE NUMBER(S) Of Document assigned or released:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## ASSESSOR'S PROPERTY TAX PARCEL/ACCOUNT NUMBER

- ☐ Additional Numbers on Page \_\_\_\_\_ of Document.
- ☐ Property Tax parcel ID is not yet assigned.
- ☐ Additional Parcel Numbers on Page \_\_\_\_\_ of Document.

The Auditor/Recorder will rely on the information provided on the form. The Staff will not read the document to verify the accuracy or completeness of the indexing information.

**DURABLE POWER OF ATTORNEY**

WANDA VIOLET BANDY, residing at Underwood, Skamania County, Washington, as authorized by RCW 11.94, hereby names her husband, BERNARD K. BANDY, as attorney-in-fact with the intention that this designation of durable power of attorney shall remain in force and not be limited by any future disability or incompetence of the principal. In the event BERNARD K. BANDY shall be unwilling or unable to act as attorney-in-fact, WANDA VIOLET BANDY appoints her step-daughter, VICKIE GAIL HOSEY, residing in Springfield, Missouri, and daughter, LAVEDA FAYE VINSANT, residing in White Salmon, Washington, as co-alternate attorneys-in-fact, with all the same powers as granted unto the first-named attorney-in-fact.

**1. POWERS.**

(a) **General Powers.** The attorney-in-fact shall act as a fiduciary for the principal. The attorney-in-fact shall have all powers over the principal's estate that the principal has or acquires, both within and without the State of Washington, except for those powers specifically excluded in paragraph 1(c) of this document. In the event of the principal's disability or incompetence the attorney-in-fact shall have equal powers over the principal's person as well.

(b) **Specific Powers.** The attorney-in-fact shall have all powers as are necessary or desirable to provide for the support, maintenance, health, emergencies, and urgent necessities of the Principal. The specific powers of the attorney-in fact shall include, but not be limited to, the following:

ROBERT D.  
WEISFIELD  
Attorney-at-Law

WSBA # 3538  
P.O. Box 421  
(218 E. Steuben)  
Bingen, WA 98605  
(509) 493-2772

**DURABLE POWER OF ATTORNEY**  
PAGE 1 of 5

1 (1) To have the sole and exclusive authority to determine  
2 medical treatment for the principal, if the principal shall be  
3 physically or mentally incapacitated or otherwise unable to make  
4 such authorization for herself, including authorization for  
5 emergency care, hospitalization, surgery, therapy and/or any other  
6 kind of treatment which the attorney-in-fact shall, in his/her sole  
7 discretion, think necessary.

8 (2) To be given first priority, along with the other members  
9 of the principal's family, in visitation should the principal be a  
10 patient in any institution and unable to express a preference on  
11 account of her illness or disability.

12 (3) To have the authority to revoke any Community  
13 Property Agreement between the principal and her spouse and to  
14 make any necessary gifts for the purpose of qualifying the principal  
15 for medical assistance or limited casualty program for the medically  
16 needy.

17 (4) To buy, receive, lease, borrow, accept, or otherwise  
18 acquire; to sell, convey, lend, release, waive, mortgage, quit claim,  
19 or otherwise encumber or dispose of; to revoke, create, or modify  
20 any trust of; or to contract or agree for the acquisition, disposal, or  
21 encumbrance of, any property whatsoever or any custody,  
22 possession, interest, or right therein, upon such terms as my said  
23 attorney shall think proper.

24 (5) To make, endorse, accept, receive, sign, seal, execute,  
25 acknowledge and deliver deeds, mortgages, leases, assignments,  
26 agreements, certificates, obligations, checks, notes, bonds, vouchers,  
27 receipts, notices, claims, proofs, proxies, stock powers, bond or  
28 stock certificates and such other written instruments of whatever  
kind and nature as may be necessary, convenient, or proper in the  
premises.

(6) To deposit, withdraw or transfer any money or credits in  
any banking or building, savings, loan or credit union institution or  
any other depository, or investment or execute all renew any  
checks, withdrawals, deposits, promissory notes, bonds, bills or  
exchange or evidences of indebtedness and to waive notice of demand  
and other protest and to transact and perform any and all other  
banking or financial business and affairs of any kind whatsoever, as  
fully and completely as I may do if present.

(c) Exclusions. The attorney-in-fact shall not have the power to revoke or change any estate planning or testamentary documents previously executed by the principal, except as provided herein.

2. EFFECTIVE DATE. This power of attorney shall become effective immediately.

3. DURATION. This Durable Power of Attorney becomes effective as provided in paragraph 2, and shall remain in effect until revoked or terminated under the terms of paragraph 4.

4. REVOCATION AND TERMINATION.

(a) Revocation. This power of attorney may be revoked, suspended or terminated in writing by the principal with written notice to the designated attorney-in-fact and by recording the written instrument of revocation in the office of the recorder or auditor of the principal's residence - to wit - the auditor's office of Skamania County in Stevenson, Washington.

(b) Termination by Death of the Principal. The death of the principal shall be deemed to revoke this power of attorney upon actual knowledge or actual notice being received by the attorney-in-fact.

(c) Nomination of Guardian. If guardianship or protective proceedings are commenced in the appropriate court for the appointment of a guardian or limited guardian of the principal's estate or person, the principal hereby nominates the attorney-in-fact as the appropriate person to be appointed as guardian or limited guardian if the guardianship is deemed necessary by the court. Pursuant to RCW 11.94.010, the court shall appoint the attorney-in-fact as the principal's guardian or limited guardian if this nomination is the principal's most recent nomination made in a Durable Power of Attorney. The court shall



not appoint the attorney-in-fact as the principal's guardian or limited guardian only if good cause is shown or if the attorney-in-fact is deemed disqualified.

(d) Termination by Appointment of Guardian. This power of attorney may be terminated, revoked, or suspended by any person who is appointed by the Superior Court to be guardian of the estate of the principal; however, court appointment of a guardian of the person of the principal shall not affect this power of attorney.

5. RIGHTS AND DUTIES OF THE ATTORNEY-IN-FACT.

(a) Reliance. The attorney-in-fact and all persons dealing with the attorney-in-fact shall be entitled to rely upon this power of attorney so long as it is effective, and has not been revoked, suspended, or terminated. Any action taken in reliance on this document unless otherwise invalid or unenforceable shall be binding on the heirs, devisees, legatees, or personal representatives of the principal.

(b) Indemnity. The estate of the principal shall hold harmless and indemnify the attorney-in-fact from all liability for acts done in good faith and not done in fraud of the principal.

(c) Accounting. The attorney-in-fact shall be required to account to any subsequently appointed personal representative.

Dated this 26 day of August, 1997.

Wanda Violet Bandy

WANDA VIOLET BANDY, Principal

STATE OF WASHINGTON )

County of Klickitat )

SS

This is to certify that on the 26 day of August, 1997, before me, the undersigned Notary Public, personally appeared WANDA VIOLET BANDY, to me known to be the individual described herein and who executed the foregoing Durable Power of Attorney, and acknowledged to me that she signed and sealed the same as her free and voluntary act and deed, for the uses and purposes therein mentioned.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal.



*Heidi Struck*  
Heidi Struck  
Notary Public for Washington  
residing at White Salmon, therein.  
Commission expires: 4/11/98

ROBERT D.  
WEISFIELD  
Attorney-at-Law  
WSBA # 3538  
P.O. Box 421  
(210 E. Stauban)  
Bingen, WA 98605  
(509) 493-2772

DURABLE POWER OF ATTORNEY  
PAGE 5 of 5

**DECLINATION OF RIGHT TO SERVE AS ATTORNEY IN FACT**  
**pursuant to**  
**POWER OF ATTORNEY**

I, **Vicki G. Hosey**, residing at 506 Jamie Drive, Selah, WA 98942, having been named as attorney in fact pursuant to the terms of a DURABLE POWER OF ATTORNEY executed by Wanda Bandy on the 26th day of August, 1997 and recorded with the Auditors Office of SKAMANIA COUNTY as Auditors File No. 143779. I am unable or unwilling to act and wish to relinquish all authority to act as attorney in fact designee. By executing this instrument I acknowledge that LAVEDA FAYE VINSANT named as alternate after me will act. I further acknowledge that I will have no rights to act unless reappointed by Wanda Bandy through a new power of attorney which would need to be signed in the future.

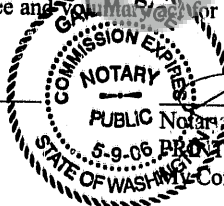
DATED this 7 day of March, 2003.

Vicki G. Hosey  
 Vicki G. Hosey

STATE OF WASHINGTON )  
 ) ss.  
 COUNTY OF Yakima )

I certify that I know or have satisfactory evidence that Vicki G. Hosey signed this instrument and acknowledged it to be her free and voluntary act for the uses and purposes mentioned in the instrument.

DATED: 3-7-03



PUBLIC Notary Public

5-9-06 PREPARED NAME: Gail M. Rice

Commission Expires: 5-9-06