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FIL

I, <u>Deraid E. Barnes</u>, resident of the State of Washington, give <u>Mildred E. Barnes</u> (referred to below as the "attorney-in-fact") a durable power of attorney, with the intention that it shall remain in effect and not be limited by any future disability or incompetence I may have.

1. POWERS

A. The attorney-in-fact shall act as a fiduciary for me and shall have all powers over my estate that I have or acquire, both within and outside of Washington. These powers 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. It is my wish that, to the full extent permitted by law, property be transferred for the purpose of qualifying me for governmental medical assistance should I need medical care. I specifically authorize any transfer of property as a gift to my spouse. The attorney-in-fact is specifically authorized to revoke any community property agreement.

C. The attorney-in-fact shall have all powers over my person necessary or desirable to provide for my support, maintenance, health, or comfort.

2. EFFECTIVE DATE AND DURATION

This power of attorney shall become effective immediately

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and shall remain in effect until revoked or until my death.

3. REVOCATION

I may revoke this power of attorney by giving written notice to the attorney-in-fact and by recording the written instrument of revocation in the office of the <u>SKamania</u> County Department of Records.

4. 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with the attorney-in-fact shall be entitled to rely upon this power of attorney so long as it is effective, and has not been revoked. Any action taken in reliance on this document, unless otherwise invalid or unenforceable, shall be binding on my heirs, devisees, legatees, or personal representatives.
- B. <u>Indemnity</u>. My estate shall hold harmless and indemnify the attorney-in-fact from all liability for acts done for me in good faith based on this power of attorney.
- C. Accounting. The attorney-in-fact shall be required to account to any subsequently appointed personal representative.

5. NOMINATION OF GUARDIAN

I nominate the attorney-in-fact for consideration by the court as my guardian or limited guardian in the event that any guardianship proceeding for my person or estate should be commenced.

Dated: 27 September 1994

on September 1994

on September 1994

a person whom I know to be appeared before me in person, signed above, and acknowledged that the signing was done freely and voluntarily for the purposes mentioned above.

Dated: State of Washington,

Notary Public, State of Washington,

residing at Curson

Commission expires: 2/23/45

PEGGY 8. LOWRY

STATE OF WASHINGTON

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