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GENERAL DURABLE POWER OF ATTORNEY

CARY M. OLSON

I, FLORA ROMINE, hereby appoint Carol Rike as my attorney in fact to act in my name and for my benefit. In the event Carol Rike is unable or unwilling to act as my attorney in fact, I hereby appoint Pamela Rike Neblock as my attorney in fact. In the event Pamela Rike Neblock is unable or unwilling to act as my attorney in fact. I hereby appoint Larry Rike as my attorney in fact.

FOR THE POLLOWING PURPOSES:

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- 1. General. My attorney in fact shall have all the powers of an absolute owner over my assets and liabilities, as provided in RCW 11.94, to act as my fiduciary in my name and for my benefit, whether such asset or liability is located within the State of Washington or elsewhere, to do all things that I might do if personally present and legally competent.
- a. <u>Purposes</u>. My attorney in fact shall have full power to provide for my support, maintenance, emergencies, welfare, comfort, investments, necessities and health.
- b. <u>Durable Power.</u> This power of attorney shall not be affected by disability of the principal and shall take effect as set forth in Paragraph 2.
- I specify, without limiting the purposes otherwise set forth herein, this power shall include the power to purchase or sell any securities or any interest therein and in that regard to endorse or transfer any security including stock certificates, stock powers, bonds, mutual funds and to execute affidavits of domicile or other documents necessary to effect the transfer of such property or interest, to take possession of any security or register same in the name of any stock broker or stock brokerage account.
- authority to give informed consent on behalf of the principal to obtain medical, surgical, health and/or nursing care treatment or non-treatment, as provided in Chapter 7.70 RCW; provided, however, that my attorney in fact may not consent, without court approval, to any procedure referred to in RCW 11.92.040(3) that requires court approval before a guardian may consent to it.
- disclaim pursuant to the laws of the State of Washington and the Internal Revenue Code all or any assets, property or interests to which I might be entitled as a beneficiary. In disclaiming, my attorney in fact may rely on the advice of my attorney regarding my estate planning objectives.

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- f. Tax Matters, My attorney in fact shall have authority to handle all my tax matters including but not limited the Internal Revenue Service and the taxing authority of any state of which I am a resident, whether such residence is my domicile or otherwise, and of any state which has asserted a claim for tax. This authority shall include the authority to submit an Internal Revenue Service Form 2848 with a statement attached to it indicating the validity of this power of attorney. My attorney in fact shall have authority to pay any tax or assessment; appear for and represent me, in person or by attorney, in all tax matters; execute any power of attorney forms required by the Internal Revenue Service, the state in which I reside, or any other taxing authority; receive confidential information from any taxing authority; prepare, sign, and file federal, state, and local tax returns and reports for all tax matters, including income, gift, estate, inheritance, generation-skipping, bales, business, FICA, payroll, and property tax matters; execute waivers, including waivers of restrictions on assessment or collection of tax deficiencies and waivers of notice of disallowance of a claim for credit or refund; execute consents, closing agreements, and other documents related to my tax liability; make any elections available under federal or state tax law; and delegate authority or substitute another representative with respect to all matters described in this paragraph.
- 2. Effectiveness. This power of attorney shall become effective immediately
- Definition of Disability. Disability shall include the inability to manage property and affairs effectively for reasons such as, but not limited to, mental illness, mental deficiency, developmental disability, mental retardation, physical illness, advanced age, chronic or excessive use of drugs, chronic intoxication, confinement by governmental authority, detention by a foreign power or disappearance. I shall be deemed to have full capacity and not be disabled unless a committee of two (2) physicians, each of whom has completed a full examination for this purpose and unanimously determines otherwise and evidences its determination in a signed writing delivered to my attorney in fact. If reasonably practical, the committee shall include my regularly attending physician, if any. In the case of confinement, detention or disappearance, disability may be evidenced by a written statement of a qualified person with knowledge of such disability. Upon my request, the committee, or a replacement committee, shall determine whether I am no longer disabled and evidence its determination in a signed writing delivered to my attorney in fact. Alternatively, incompetence or competence may be established by a finding of a court having jurisdiction over me.
- 4. Guardian. In the event it is necessary to appoint a guardian or limited guardian for my person or estate, I appoint Carol Rike for that purpose. In the event Carol Rike is unable or unwilling to act as guardian or limited guardian, I hereby appoint Pamela Rike Meblock to act as guardian or limited guardian for my person or estate. In the event Pamela Rike Meblock is unable or unwilling to

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act as guardian or limited guardian, I hereby appoint Larry Rike to act as guardian or limited guardian for my person or estate.

- 5. Revocation of Prior Powers of Attorney. Any powers of attorney I may have previously executed are hereby revoked in their entirety.
- 6. Termination. Notwithstanding any uncertainty as to whether I am alive or dead, this Power of Attorney shall continue in effect to the extent permitted by law until revoked or terminated.
- a. While competent, I may revoke this power of attorney by written notice to my attorney in fact and by recording a document of revocation in the Office of the Auditor of Clark County, Washington.
- b. The appointment of a guardian of my estate shall vest in that guardian, with court approval, the power to revoke, suspend or terminate this power of attorney. A guardian of my person only shall not have such power.
- c. My death shall revoke this power of attorney only at such time as my attorney in fact receives actual written notice of my death.
- 7. Reliance. As long as neither my attorney in fact nor any person dealing with my attorney in fact has, at the time of any act taken pursuant to this Power of Attorney, received actual knowledge or written notice of revocation or termination of this Power of Attorney by death or otherwise, my attorney in fact and persons dealing with my attorney in fact shall be entitled to rely upon this Power of Attorney.
- 8. Indemnity. My estate shall hold harmless and indemnify my attorney in fact from any and all liability from acts done in good faith. This indemnification shall not extend to any negligence or willful wrongdoing by my attorney in fact.
- 9. Accounting. My attorney in fact shall be required to account, within a reasonable period of time, to me, any successor attorney in fact, guardian or personal representative.
- 10. Governing Law. The terms of this Power of Attorney shall be governed by the laws of the State of Washington.

DATED this 12 day of 1961, 1995.

Flor Romine

STATE OF WASHINGTON)

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County of Clark

I certify that I know or have satisfactory evidence that Flora Rike is the person who appeared before me, and said person acknowledged that she signed this instrument and acknowledged it to be her free and voluntary act for the uses and purposes mentioned in the instrument.

DATED this 12th day of April

MARGARET M. PHELAN NOTARY PUBLIC STATE OF WASHINGTON COMMISSION EXPINES SEPTEMBER 15, 1988

Notary Public Notary Public My appointment expires 9/05/96

BLAIR, SCHAEFER, HUTCHISON & WOLFE Attorneys at Law 1014 Franklin Street Post Office Box 1148 Vancouver, Washington 98666-1148 Telephone: 360/693-5883; 503/285-4103