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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. Ford, Christopher L.
 - 2.
 - 3.
 - 4.
- ☐ Additional Names on Page _____ of Document.

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

1. Deister, Bussy L.
 - 2.
 - 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:

- ☐ Additional Numbers on Page _____ of Document.

ASSESSOR'S PROPERTY TAX PARCEL/ACCOUNT NUMBER

- ☐ 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

The undersigned, CHRISTOPHER L. FORD, domiciled and residing in the State of Washington, as authorized by the laws of the State of Washington, herewith names, constitutes and appoints GUSSY L. DEISTER, as attorney-in-fact for the undersigned.

1. **POWERS.**

a. **General.** The attorney-in-fact, as fiduciary, shall have all powers of an absolute owner over the assets and liabilities of the Principal, whether located within or without of the State of Washington; provided, however, the attorney-in-fact shall not have the power to make gifts of the Principal's property, nor to revoke or change any testamentary documents previously executed by the Principal.

b. **Securities.** As assurance to transfer agents, and not by way of limitation, this power includes the power to purchase or sell any stocks, bonds or other securities or any interest therein and in that regard to endorse any stock certificates, stock powers, affidavits of domicile or other documents necessary to effect the transfer of such property or interest, to take possession of any stock certificate, bond or other security or register same in the name of any stock broker or stock brokerage account.

c. **Health Care Decisions.** The attorney-in fact shall have all powers to make medical and health care decisions on behalf of the Principal, including the power to withhold or withdraw treatment, grant informed consent or refuse treatment pursuant to RCW 7.70.065, and to exercise any and all other powers necessary or appropriate to provide for health care and treatment of the Principal. The Principal has executed a Directive under the Natural Death Act of the State of Washington. This Power of Attorney shall include the power to approve and direct the withholding of life sustaining procedures including, but not limited to, utilizing mechanical or other artificial means including cardiopulmonary resuscitation, defibrillation, the use of a respirator, intubation, the insertion of a naso-gastric tube, and intravenous nutrition and hydration. Pursuant to RCW 11.91.010 and RCW 11.92.040, the attorney-in-fact may not, without Court approval on behalf of the Principal, consent to: therapy or other procedures which induce convulsion; surgery solely for the purpose of psychosurgery; amputation; other psychiatric or mental health procedures which are intrusive on the person's body integrity or physical freedom of movement. It is the intent of the Principal that this Power of Attorney and the Directive be interpreted to grant the broadest scope of power to make health care decisions and refuse treatment permitted under the laws of the State of Washington. In the event the Principal is in a persistent vegetative state, it is Principal's desire that further medical treatment be refused.

d. **Real or Personal Property:** The attorney-in-fact shall have all powers to sell, convey, exchange or otherwise transfer or encumber any real or personal property of the Principal.

2. **PURPOSES:** That my 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 undersigned.

3. **DURATION:** This Durable Power of Attorney becomes effective upon execution and shall remain in effect to the extent permitted by Chapter 11.94, RCW or until revoked or terminated under Paragraph 4 and 5, notwithstanding any uncertainty as to whether the undersigned is dead or alive. This Power of Attorney shall not be affected by disability of the principal.

4. **REVOCATION:** This Power of Attorney may be revoked, suspended or terminated in writing by the undersigned with written notice to the designated attorney-in-fact and by recording the written instrument of revocation in the office of the Auditor of Clark County, Washington.

Durable Power of Attorney

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5. TERMINATION:

a. **By Appointment of Guardian:** The appointment of a guardian of the estate of the undersigned vests in the guardian with court approval, the power to revoke, suspend or terminate this Power of Attorney. The appointment of a guardian of the person does not empower the guardian to revoke, suspend or terminate this Power of Attorney.

b. **By Death of Undersigned:** The death of the undersigned shall be deemed to revoke this Power of Attorney upon actual knowledge or actual notice being received by the attorney-in-fact.

6. **ACCOUNTING:** The attorney-in-fact shall be required to account to the undersigned and to any subsequently appointed personal representative.

7. **RELIANCE:** The designated and acting 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 neither the attorney-in-fact nor any person with whom he was dealing at the time of any act taken pursuant to this Power of Attorney, had received actual knowledge or actual notice of any revocation, suspension or termination of the Power of Attorney by death or otherwise. Any action so taken, unless otherwise invalid or unenforceable, shall be binding on the heirs, devisees, legatees or personal representatives of the undersigned.

8. **INDEMNITY:** The estate of the undersigned shall hold harmless and indemnify the attorney-in-fact from all liability for acts done in good faith and not in fraud of the undersigned.

9. **APPLICABLE LAW:** The laws of the State of Washington shall govern this Power of Attorney.

10. **EXECUTION:** This Power of Attorney is signed in triplicate this 15 day of November, 2001.

Christopher L. Ford

Christopher L. Ford

STATE OF WASHINGTON)

) ss.

COUNTY OF CLARK)

On this day personally appeared before me, CHRISTOPHER L. FORD, to me known to be the individual described in and who executed the within and foregoing Durable Power of Attorney, and acknowledged that he signed the same as his free and voluntary act and deed, for the uses and purposes therein mentioned.

GIVEN under my hand and official seal this 15th day of November, 2001.

SHAWN R. MacPHERSON
STATE OF WASHINGTON
NOTARY — PUBLIC
My Commission Expires Dec 8, 2003

Shawn R. MacPherson

Notary Public in and for the State of Washington,
Residing at: CM 113
My appointment expires: 12-8-03