

**RECORDING REQUESTED BY
AND WHEN RECORDED RETURN TO:**

KATHRYN E. HOLLAND, Attorney at Law
900 Washington Street, Suite 820
Vancouver, WA 98660

DURABLE POWER OF ATTORNEY

Grantor: ANN L. JERMANN

Grantee: JERRY V. JERMANN; WILLIAM H. LUCHSINGER;
RIVERVIEW ASSET MANAGEMENT COMPANY

Abbreviated Legal: N/A

Assessor's Tax Parcel # N/A

Other Reference Nos: N/A

The undersigned, as the principal, domiciled and residing in Skamania County, Washington, hereby revokes any and all previously executed powers of attorney which are inconsistent with this power of attorney and designates the following named person or persons in the alternative as attorney in fact.

1. Designation.

- a) Financial. JERRY V. JERMANN is designated as attorney in fact. If for any reason JERRY V. JERMANN is unable or unwilling to act as attorney in fact, WILLIAM H. LUCHSINGER and RIVERVIEW ASSET MANAGEMENT COMPANY are designated as alternate co-attorneys in fact. If for any reason WILLIAM H. LUCHSINGER is unable or unwilling to act as alternate co-attorney in fact, RIVERVIEW ASSET MANAGEMENT COMPANY is designated as sole alternate attorney in fact. All references herein to "attorney in fact" shall also refer to the co-attorneys in fact.
- b) Health Care. JERRY V. JERMANN is designated as attorney in fact for health care decisions made pursuant to paragraph 2 c) below. If for any reason JERRY V. JERMANN is unable or unwilling to act as attorney in fact, WILLIAM H. LUCHSINGER is designated as alternate attorney in fact for health care decisions.

2. 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 the State of Washington. This shall include, but not be limited to, the power to:
 - i) represent the principal in all federal or state tax matters, including the signing and filing of all tax returns, including, but not limited to, Forms 1040, 709, and 2848 on the principal's behalf for tax years 2000 to 2050;
 - ii) transfer assets to and/or withdraw assets from the ANN L. JERMANN LIVING TRUST dated October 8, 1999;
 - iii) lease, let, grant, bargain, sell, contract to sell, convey, exchange, encumber, release, subdivide, develop and dispose of any real or personal property of which the principal is now or hereafter may be possessed or in which the principal may have any right, title or interest, including rights of homestead, for any price or sum and upon such terms and conditions as the attorney in fact may deem proper; and
 - iv) manage any individual retirement account (IRA) or any qualified or non-qualified retirement account, pension plan or other retirement benefit. This shall include authority to manage the investments; change investment managers; transfer accounts to different brokerage firms, mutual funds, or other retirement account providers; elect lump sum or other distributions; direct rollovers to IRAs or plan-to-plan transfers; make necessary elections and required mandatory distributions under Internal Revenue Code Section 401(a)(9); make other withdrawals as needed; and update beneficiary designations to be consistent with the principal's estate plan.
- 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 (including government bonds), shares of mutual funds, 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, stock brokerage account, or mutual fund account.
- c) Health Care Decisions. If the principal is incapacitated and is unable to make health care decisions on her own behalf, 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 exercise any and all other powers necessary or appropriate to provide for health care and treatment of the principal. The attorney in fact is to be considered a "personal

representative” of the principal for purposes of the Health Insurance Portability and Accountability Act of 1996 as it may be amended. As such, the attorney in fact is authorized to exercise the same rights that the principal could exercise with respect to receiving, reviewing, and disclosing information regarding the health care of the principal. The attorney in fact is authorized to execute an authorization required by a health care provider for the disclosure or use of health information of the principal. The principal has also executed a Directive under the Natural Death Act of the State of Washington.

- d) Disclaimer. The attorney in fact shall have the power to execute, in the manner provided in RCW 11.86.021 as now enacted or hereafter amended, a disclaimer on behalf of the principal of any interest, in whole or in part, or with reference to specific parts, shares or assets, to which the principal may become entitled.
- e) Gifting. The attorney in fact shall have power to establish or continue a gifting program to descendants, outright or in trust, which is in the best interests of the family to minimize estate taxes and is consistent with the overall estate plan. Such gifting shall be done only as reasonably necessary to reduce or eliminate the estate tax which is anticipated to be due upon the principal’s death and only if the principal’s remaining assets are projected to be well in excess of the principal’s own future needs.

3. Purposes. The attorney in fact shall have full powers as described herein for any and all purposes on behalf of the principal, including, but not limited to, the support, maintenance, health, emergencies, welfare, comfort, investments or necessities of the principal.

4. Effectiveness. THIS POWER OF ATTORNEY SHALL BECOME EFFECTIVE UPON THE DISABILITY OR INCAPACITY OF THE PRINCIPAL AND SHALL REMAIN EFFECTIVE ONLY DURING SUCH DISABILITY OR INCAPACITY. Disability or incapacity 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 or disability, advanced age, chronic or excessive use of drugs, chronic intoxication, confinement by governmental authority, detention by a foreign power or disappearance. Unless a qualified physician who has completed a full examination determines otherwise and evidences his or her determination in a signed written certificate delivered to the principal's attorney in fact, the principal shall be deemed to have full capacity and not to be disabled or incapacitated. In the case of confinement, detention or disappearance, disability may be evidenced by a written statement of qualified persons with knowledge of any such disability. Whenever the principal is considered disabled or incapacitated under this paragraph, upon written request of the principal, the physician shall determine whether the principal is still disabled or incapacitated. If determined that the principal is no longer disabled, the principal shall be deemed to have full capacity upon delivery to the attorney in fact of the physician's signed written certificate to that effect. Incapacity may also be established by a finding of a court having jurisdiction over the incapacitated principal. NOTWITHSTANDING THE ABOVE, THE PERSONS NAMED AS ATTORNEY IN FACT IN

PARAGRAPH 1 ABOVE SHALL HAVE IMMEDIATE AUTHORITY TO OBTAIN HEALTH CARE INFORMATION AS NECESSARY TO MAKE THE DETERMINATION OF INCAPACITY.

5. Duration. This durable power of attorney becomes effective as provided in paragraph 4 and shall remain in effect until revoked or terminated under paragraph 6 or 7, notwithstanding any uncertainty as to whether the principal is dead or alive.

6. 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. In addition, if this power of attorney has been recorded, the written instrument of revocation shall be recorded in the same county or counties where the original power of attorney was recorded.

7. Termination.

a) By Appointment of Guardian. The appointment of a guardian of the estate of the principal 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 only does not empower the guardian to revoke, suspend or terminate this power of attorney. In the event it becomes necessary to appoint a guardian of the principal's person or estate, it is the principal's desire that the above person or persons be appointed.

b) By Death of 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.

8. Accounting. The attorney in fact shall be required to account to any successor attorney in fact or subsequently appointed personal representative.

9. Reliance. Any person dealing with the attorney in fact shall be entitled to rely upon this power of attorney as long as such person has received no 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 principal.

10. 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 in fraud of the principal.

11. Applicable Law. The laws of the State of Washington shall govern this power of attorney.

Certificate of Physician

The undersigned certifies

1) I am a physician licensed to practice medicine in the state(s) of

Oregon, Idaho

2) I have examined Ann L. Jermann (see attached), and I find that she is physically and/or mentally disabled or incapacitated and is incapable of

- a) making health care decisions,
- b) managing her property, and/or
- c) conducting her affairs.

[Signature]

Signature

Date

12/24/15

Elizabeth Foster

Print name

Address and Phone Number

Elizabeth Foster, MD
(541) 386-5070
1750 12th St.
Hood River, OR 97031