

DOC # 0715902
01/08/2008 10:53 AM Deputy: GB
OFFICIAL RECORD
Requested By:
ALEXANDER CLAYTON MORROW &

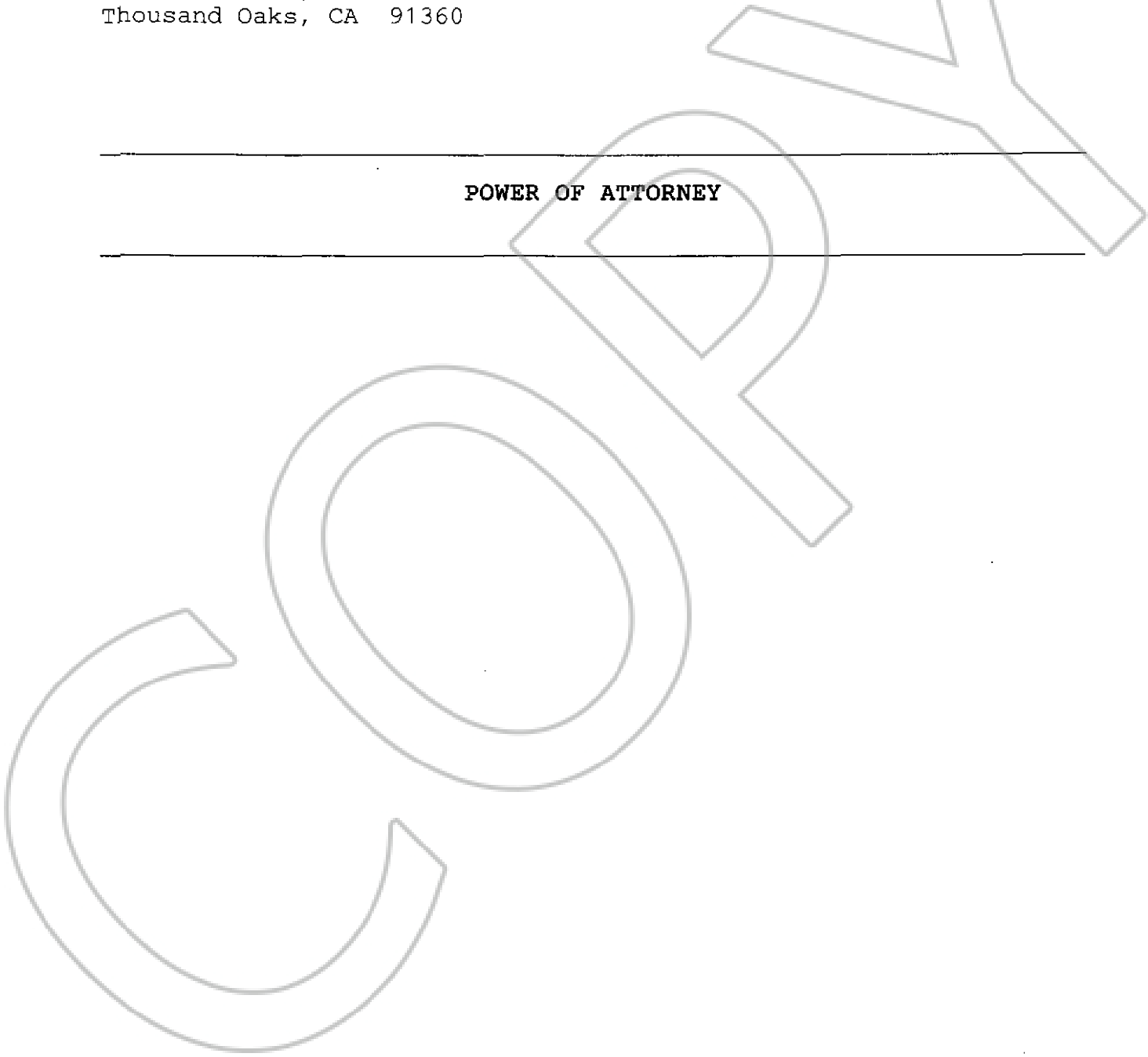
RECORDING REQUESTED BY AND
WHEN RECORDED MAIL TO:

✓ Ruth D. Morrow, Esq.
ALEXANDER, CLAYTON,
MORROW & WILSON, LLP
One Boardwalk, Suite 200
Thousand Oaks, CA 91360

WILSON
Douglas County - NV
Werner Christen - Recorder
Page: 1 Of 5 Fee: 18.00
BK-0108 PG- 1438 RPTT: 0.00



POWER OF ATTORNEY



Recording Requested By

And when recorded mail to:

Name Ruth D. Morrow, Esq. 7
 Street ALEXANDER, CLAYTON,
 Address MORROW & WILSON, LLP
 City One Boardwalk, Suite 200
 State Thousand Oaks, CA 91360
 Zip
 L J

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WOLCOTTS FORMS, INC.

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(800) 421-2220

Power of Attorney

NOTICE: THE POWERS GRANTED BY THIS DOCUMENT MAY BE BROAD AND SWEEPING. THIS DOCUMENT IS NOT INTENDED TO AUTHORIZE ANYONE TO MAKE MEDICAL OR OTHER HEALTH-CARE DECISIONS FOR YOU. IF YOU WISH TO DO SO, FORM #1401 IS DESIGNED FOR THAT PURPOSE. YOU MAY REVOKE THIS POWER OF ATTORNEY IF YOU LATER WISH TO DO SO (FORM #1404).

I, JOHN S. HAYWARD, presently of 2747 Stewart Avenue, Minden, NV 89423

(Name and Address)

the undersigned (jointly or severally, if more than one) appoint

PAMELA ROGERS, presently of 2747 Stewart Avenue, Minden, NV 89423

(Name and Address of the Person Appointed or of Each Person Appointed if you want to designate more than one)

as my agent (attorney-in-fact) to act for me in any lawful way with respect to the following initialed subjects:

INITIAL

- (A) Real Property transactions.
- (B) Tangible personal property transactions.
- (C) Stock and bond transactions.
- (D) Commodity and option transactions.
- (E) Banking and other financial transactions.
- (F) Business operating transactions.
- (G) Insurance and annuity transactions.
- (H) Estate, Trust, and other beneficiary transactions.
- (I) Claims and litigation.
- (J) Personal and family maintenance.
- (K) Benefits from Social Security, Medicare, Medicaid or other Governmental programs or Civil or Military Service.

INITIAL

- (L) Retirement plan transactions.
- (M) Tax matters.
- (N) Making gifts to my spouse, children, and more remote descendants, and parents, not to exceed in the aggregate \$12,000 to each of such persons in any year.
- (O) Full and unqualified authority to my attorney(s)-in-fact to delegate any or all of the foregoing powers to any person or persons whom my attorney(s)-in-fact shall select.
- (P) ALL THE POWERS LISTED ABOVE.
- (Q) ONLY THE POWERS SPECIFIED IN SPECIAL INSTRUCTIONS ON TOP OF PAGE 2.



(R) ALL POWERS EXCEPT MEDICAL (GENERAL POWER OF ATTORNEY)

YOU NEED NOT INITIAL ANY OTHER LINES IF YOU INITIAL LINE (P) or (Q) or (R).

- TO GRANT ALL OF THE ABOVE POWERS, INITIAL THE LINE IN FRONT OF (P) AND IGNORE THE LINES IN FRONT OF THE OTHER POWERS OR TO MAKE THIS A GENERAL POWER, INITIAL (R) ONLY.
- TO GRANT ONE OR MORE, BUT FEWER THAN ALL, OF THE FOLLOWING POWERS, INITIAL THE LINE IN FRONT OF EACH POWER YOU ARE GRANTING.
- TO WITHHOLD A POWER, DO NOT INITIAL THE LINE IN FRONT OF IT. YOU MAY, BUT NEED NOT, CROSS OUT EACH POWER WITHHELD.



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SPECIAL INSTRUCTIONS:

On the following lines you may give special instructions limiting or extending the powers granted to your agent.

UNLESS YOU DIRECT OTHERWISE ABOVE, THIS POWER OF ATTORNEY IS EFFECTIVE IMMEDIATELY AND WILL CONTINUE UNTIL IT IS REVOKED

YOU MAY INITIAL ONLY ONE OF THE FOLLOWING THREE PARAGRAPHS, BUT NEED NOT INITIAL ANY.

INITIAL

_____ **Limited** - This Power of Attorney is granted for a period of _____ shall become effective on _____ and shall terminate on _____

[Signature] _____ **Durable** - This Power of Attorney shall not be affected by subsequent incapacity of the principal and shall remain effective for a period of _____ years or after the disability or incapacity occurs. shall not terminate unless specifically revoked.

_____ **Springing** - This Power of Attorney shall become effective upon the incapacity of the principal and shall shall remain effective for a period of _____ years or after the disability or incapacity occurs. shall not terminate unless specifically revoked.

If either of the Durable or Springing paragraphs are initialed then the **NOTICE TO PERSONS EXECUTING DURABLE POWER OF ATTORNEY** below applies.

NOTICE TO PERSON EXECUTING DURABLE POWER OF ATTORNEY

A durable power of attorney is an important legal document. By signing the durable power of attorney, you are authorizing another person to act for you, the principal. Before you sign this durable power of attorney, you should know these important facts:

Your agent (attorney-in-fact) has no duty to act unless you and your agent agree otherwise in writing.

This document gives your agent the powers to manage, dispose of, sell, and convey your real and personal property, and to use your property as security if your agent borrows money on your behalf. This document does not give your agent the power to accept or receive any of your property, in trust or otherwise, as a gift, unless you specifically authorize the agent to accept or receive a gift.

Your agent will have the right to receive reasonable payment for services provided under this durable power of attorney unless you provide otherwise in this power of attorney.

The powers you give your agent will continue to exist for your entire lifetime, unless you state that the durable power of attorney will last for a shorter period of time or unless you otherwise terminate the durable power of attorney. The powers you give your agent in this durable power of attorney will continue to exist even if you can no longer make your own decisions respecting the management of your property.

You can amend or change this durable power of attorney only by executing a new durable power of attorney or by executing an amendment through the same formalities as an original. You have the right to revoke or terminate this durable power of attorney at any time, so long as you are competent.

This durable power of attorney must be dated and must be acknowledged before a notary public or signed by two witnesses. If it is signed by two witnesses, they must witness either (1) the signing of the power of attorney or (2) the principal's signing or acknowledgment of his or her signature. A durable power of attorney that may affect real property should be acknowledged before a notary public so that it may easily be recorded.

You should read this durable power of attorney carefully. When effective, this durable power of attorney will give your agent the right to deal with property that you now have or might acquire in the future. The durable power of attorney is important to you. If you do not understand the durable power of attorney, or any provision of it, then you should obtain the assistance of an attorney or other qualified person.



EXERCISE OF POWER OF ATTORNEY WHERE MORE THAN ONE AGENT DESIGNATED

If I have designated more than one agent, the agents are to act _____

IF YOU APPOINT MORE THAN ONE AGENT AND YOU WANT EACH AGENT TO BE ABLE TO ACT ALONE WITHOUT THE OTHER AGENT JOINING, WRITE THE WORD "SEPARATELY" IN THE BLANK SPACE ABOVE. IF YOU DO NOT INSERT ANY WORD IN THE BLANK SPACE, OR IF YOU INSERT THE WORD "JOINTLY", THEN ALL OF YOUR AGENTS MUST ACT OR SIGN TOGETHER.

I agree that any third party who receives a copy of this document may act under it. Revocation of the power of attorney is not effective as to a third party until the third party has actual knowledge of the revocation. I agree to indemnify the third party for any claims that arise against the third party because of reliance on this power of attorney.

Signed this 11 day of October September, 2007

State of Nevada
County of Dough

John S. Hayward
AUTOGRAFH

JOHN S. HAYWARD

Social Security Number XXX

State of CALIFORNIA

County of Dough

BY ACCEPTING OR ACTING UNDER THE APPOINTMENT, THE AGENT ASSUMES THE FIDUCIARY AND OTHER LEGAL RESPONSIBILITIES OF AN AGENT

NOTICE TO PERSON ACCEPTING THE APPOINTMENT AS ATTORNEY-IN-FACT

By acting or agreeing to act as the agent (attorney-in-fact) under this power of attorney you assume the fiduciary and other legal responsibilities of an agent. These responsibilities include:

1. The legal duty to act solely in the interest of the principal and to avoid conflicts of interest.
2. The legal duty to keep the principal's property separate and distinct from any other property owned or controlled by you.

You may not transfer the principal's property to yourself without full and adequate consideration or accept a gift of the principal's property unless this power of attorney specifically authorizes you to transfer property to yourself or accept a gift of the principal's property. If you transfer the principal's property to yourself without specific authorization in the power of attorney, you may be prosecuted for fraud and/or embezzlement. If the principal is 65 years of age or older at the time that the property is transferred to you without authority, you may also be prosecuted for elder abuse under Penal Code Section 368. In addition to criminal prosecution, you may also be sued in civil court.

I/We have read the foregoing notice and I/We understand the legal and fiduciary duties that I/We assume by acting or agreeing to act as the agent(s) (attorney-in-fact) under the terms of this power of attorney.

Date: Oct. 14 2007 September, 2007

PAMELA ROGERS

PRINT NAME OF AGENT

Pamela Rogers
AUTOGRAFH OF AGENT

Date: _____

PRINT NAME OF AGENT

AUTOGRAFH OF AGENT



ALL-PURPOSE ACKNOWLEDGMENT

State of NV
County of Doughs } ss.

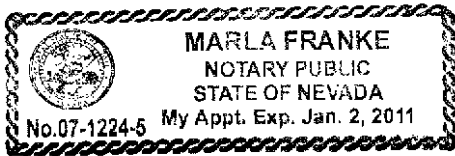
On Oct 4, 2007 before me, Marla Franke
Date Name and Title of Officer (e.g., "Jane Doe, Notary Public")
personally appeared JOHN S. HAYWARD
Name(s) of Signer(s)

- personally known to me
- proved to me on the basis of satisfactory evidence

to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal

[Handwritten Signature]
Signature of Notary Public



OPTIONAL

Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

Description of Attached Document

Title or Type of Document: POWER OF ATTORNEY

Document Date: , 2007 Number of Pages: _____

Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer

Signer's Name: _____

- Individual
- Corporate Officer — Title(s): _____
- Partner — Limited General
- Attorney-in-Fact
- Trustee
- Guardian or Conservator
- Other: _____

Signer Is Representing: _____

