11/10/2020 04:14 PM

BARBARA J. CAMPBELL

Total:\$40.00

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RECORDING REQUESTED BY AND WHEN RECORDED RETURN TO:

Barbara June Campbell 1780 Mahogany Circle Minden, NV 89423



KAREN ELLISON, RECORDER

DURABLE POWER OF ATTORNEY

- I, BARBARA JUNE CAMPBELL;, residing in Douglas County, State of Nevada, appoint you, CORAL ANN CAMPBELL, as my attorney-in-fact (sometimes referred to as "agent") to act for me and in my name as authorized in this document. By this document, I intend to create a Durable Power of Attorney.
- I. YOUR POWERS. Your primary responsibilities are to assure that I am adequately supported for the rest of my life to the extent that my assets permit. In order to accomplish this, I give you full power and authority to perform all necessary acts on my behalf as fully as if I were personally present and able to act, but such powers shall not interfere with or supersede the powers granted to the Trustee of any trust established for my benefit.

The powers granted to you in this document shall be effective immediately and shall not be affected by my subsequent disability or incapacity.

- You shall have the following powers:
- COLLECT AND RECOVER ASSETS. To demand, sue for, and collect all such sums of money, debts, dues, accounts, legacies, bequests, interest, dividends, annuities and demands that are now or may later become due or payable to me, including any benefits payable by any governmental body or agency, to take all lawful means to recover such assets, and to compromise claims and grant discharges for such assets in my name;
- OPERATE BUSINESSES. To continue the operation of any business owned by me for such time and in such manner as you shall deem advisable, including, but not limited to, paying my employees, providing employee benefits, and paying all business related expenses. to transact every kind of business for me, in my name as my act and deed, to incorporate any business of mine and put additional capital into such businesses, to join in any plan of reorganization, consolidation or merger of such business, or to sell or liquidate the business at such time and on such terms as you shall deem advisable, and to represent me in establishing the value of any business under any "buy-sell" agreement to which I may be a party;
- DEAL WITH FINANCIAL INSTITUTIONS. To establish, maintain, or terminate bank accounts, security accounts, certificates of deposit, money market accounts, margin accounts, mutual funds, treasury bills and notes, and any other type of cash fund, cash equivalent or security in my sold name or jointly in my name with others, and to negotiate, endorse or transfer any checks or other instruments with respect to any such accounts, and to endorse, deposit, or collect any checks or drafts made payable to me or to my order at any bank, savings bank, savings and loan or other financial or brokerage institution:

- 4. <u>MAKE GIFTS</u>. To make gifts, grants or other transfers, including the forgiveness of indebtedness and the completion of any charitable pledges I may have made, outright or in trust, to or for the benefit of any one or more of my descendants, my spouse, or any charity qualified under section 170(c) of the Internal Review Code of 1986, as amended from time to time (the "Code"), to make payments for medical care;
- 5. <u>DISACLAIM, RENOUNCE, AND ASSIGN INTERESTS</u>. To disclaim, renounce, or assign any gift, inheritance, bequest or right of succession, with or without consideration;
- 6. <u>DEAL WITH TRUSTS</u>. To establish any trust with my assets for my benefit or for the benefit of any other person upon such terms as may be necessary or proper, to transfer any asset in which I have an interest to such trust or to any trust that I may have previously created, and to exercise (in whole or in part), release, or let lapse any power I may have under any trust whether or not created by me, including any power or appointment, revocation or withdrawal;
- 7. REPRESENT ME IN ALL TAX MATTERS. To prepare, sign, and file federal, state or locate income, gift, and other tax returns of all kinds, FICA returns, payroll tax returns, claims for refunds, requests for extensions of time, petitions to the tax court or to other courts regarding tax matters, and any and all other tax related documents, including, without limitation, receipts, offers, waivers, consents, closing agreements and any power of attorney form required by the Internal Revenue Service or other taxing authority and any "open" years, to pay taxes due, collect refunds, post bonds, receive confidential information, and contents deficiencies determined by the Internal Revenue Service or other taxing authorities, to exercise any elections I may have under federal, state or local tax law, and generally represent me in all tax matters and proceedings of all kinds and for all periods before all officers of the Internal Revenue Service and any other taxing authority;
- 8. <u>EMPLOY OTHERS</u>. To employ and remove any domestic help, custodian, attorney, accountant, investment counsel or other professional advisor to assist you in administering my property and to pay them reasonable compensation;
- 9. ENTER, ESTABLISH, CLOSE, OR MAINTAIN SAFE DEPOSIT BOXES. To enter, establish, close, maintain and have access to any safe deposit box held in my name alone or jointly with another person whether or not the institution renting such box has its own form of power of attorney for such purposes and to remove all or any of the contents of such box;
- 10. <u>LITIGATE</u>. To prosecute, defend, compromise, or arbitrate any claims on my benefit in any local, state or federal court or administrative body to settle, appeal, or dismiss such actions.
- 11. <u>MISCELLANEOUS POWERS</u>. To open, read, respond to, and redirect my mail, cancel or continue and use any of my charge accounts and credit cards, cancel or continue any of my club, church or other organization memberships, and continue any payments or contributions incidental to such memberships, take custody of all of my important documents,

including, but not limited to, my trust agreements, deeds, leases, life insurance policies, contracts and securities, to enter into oral or written agreements on my behalf, support and maintain any animals I may own, continue to pay any installment obligations I may incur, execute, acknowledge, and delivery any agreement, stock power, deed, lease and assignment of lease, assignment of accounts receivable, and notice of the expected assignment of such accounts and cancellation of such notice covenant, indenture, mortgage, deed of trust and reconveyance thereunder, bill, bond, note, receipt, evidence of debt, release and satisfaction of mortgage, judgment, or other debts, and any other document for the accomplishment of, or relating to, and acts authorized by this instrument, and to perform all, an, and every act required to be done as fully as I could do if personally present and able to act.

- 12. EXECUTE DOCUMENTS, ENTER INTO CONTRACTS, ANY PAY REASONABLE COMPENSATION OR COSTS IN IMPLEMENTING THE ABOVE POWERS. To sign, execute, deliver, acknowledge and make declarations in any document or enter into any contract that may be necessary, desirable, convenient or proper in order to exercise any of the powers described in this paragraph A, and pay reasonable compensation or costs in the exercise of any such powers.
- **B.** <u>INCIDENTAL POWERS</u>. In connection with the exercise of any of the powers described in this Section I, you are authorized and empowered to perform any other act necessary or incidental to the exercise of such powers with the same validity and effect as if I were personally present, competent and personally exercised the powers myself.
- II. <u>RATIFICATION</u>. I hereby ratify and confirm all that you shall do or cause to be done under the authority granted in this document, and all promissory notes, bills of exchange, drafts, other obligations, agreements, stock powers, instruments, and other documents, signed, endorsed, drawn, accepted, made, executed or delivered by you shall bind me, my estate, and my heirs, successors and assigns.
- III. <u>THIRD PARTY RELIANCE</u>. For the purpose of inducing any physician, hospital, bank, broker, custodian, insurer, lender, transfer agent, taxing authority, governmental agency, or other party to act in accordance with the powers granted in this document, I hereby represent, warrant, and agree that:
- A. <u>INDEMNITY</u>. If this document is revoked or amended for any reason, I, my estate, my heirs, successors and assigns will hold such party or parties harmless from any loss suffered, or liability incurred, by such party or parties in acting in accordance with this document prior to that party's receipt of written notice of any such termination or amendment.
- **B.** <u>SCOPE OF POWERS</u>. The powers conferred on you by this document may be exercised by you alone and your signature or act under the authority granted in this document may be accepted by third parties as fully authorized by me and with the same force and effect as if I were personally present, competent, and acting on my own behalf.
- C. RELIANCE. No person who acts in reliance upon any representation you may make as to the scope or your authority granted under this document shall incur any liability to me, my estate, my heirs, successors or assigns for permitting you to exercise any such power, nor

shall any person who deals with you be responsible to determine or insure the proper application of funds or property.

- **D.** <u>REQUESTS FOR INFORMATION</u>. All third parties from who you may request information regarding my personal affairs are hereby authorized to provide such information to you without limitation and are released from any legal liability whatsoever to me, my estate, my heirs, successors or assigns for complying with your requests.
- E. <u>COURT PROCEEDINGS</u>. You shall have the right to seek appropriate court orders mandating acts that you deem appropriate if a third party refuses to comply with actions taken by you which are authorized by this document or enjoining acts by third parties which you have not authorized. In addition, you may sue a third party who fails to comply with actions I have authorized you to take and demand damages, including punitive damages, on my behalf for such noncompliance.
- IV. <u>REVOCATION AND AMENDMENT</u>. I revoke all prior Powers of Attorney for Assets that I may have executed and I retain the right to revoke or amend this document and to substitute other attorneys in your place. Amendments to this document shall be made in a writing signed by me personally and they shall be attached to the original of this document and recorded in the same county or counties as the original if the original has been recorded.
- V. <u>ALTERNATE AGENT</u>. If you resign, die, become incapacitated or fail to act as agent for any other reason, or if I revoke your appointment, then CANDACE JANE CAMPBELL shall become alternate agent and shall become my agent with the power and authority conferred by this instrument:

Your resignation as my agent, or the declination of the named alternate agent, shall be made in writing and shall be attached to the original of this document and recorded in the same county or counties as the original if the original has been recorded.

- VI. <u>NOMINATION OF CONSERVATOR</u>. If at any time it becomes necessary to appoint a conservator of my estate, I hereby nominate you as such conservator. I grant to you as my conservator all of the powers specified in the Nevada Probate Code. You shall serve in such capacity without bond, or, if a bond be required, I request that such bond be set as low as possible. I hereby revoke all prior conservatorship nominations that I have made.
- VII. <u>DEFINITION OF DECENDANTS</u>. As used in this document, my "descendants" shall include my lineal issue of all degrees, and references to my descendants shall include descendants by adoption as well as by birth so long as you have determined that such descendant lived for a significant period of time during his or her minority as a member of the adopting parent's household.
- VIII. <u>PHOTOSTATIC COPIES</u>. All parties dealing with you are authorized to rely fully on a photostatic copy of an original executed copy of this Durable Power of Attorney.
- IX. <u>SEVERABILITY</u>. If any provisions of this document are not enforceable or valid, the remaining provisions shall remain effective.

- X. <u>EXCULPATION</u>. Neither you nor any alternate shall incur any liability to me, my estate, my heirs, successors, or assigns for acting or refraining from acting hereunder, except for willful misconduct or gross negligence. Neither shall you or any alternate have the responsibility to make my assets productive of income, increase the value of my estate, diversity my investments, or for entering into transactions authorized by this document with yourself so long as you believe such actions are in my best interests or in the best interests of my estate and those interested in my estate.
- XI. <u>GOVERNING LAW</u>. This document shall be governed by the laws of the State of Nevada in all respects, including its validity, construction, interpretation, and termination.

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BARBARA JUNE CAMPBI	EKL

Principal

Signature of Attorney-in-Fact:

CORAL ANN CAMPBELL

Address of

Attorney-in-Fact: 9779

9779 Sunny Hill Road

Ono, CA 96047

Telephone Number:

530-377-0968 (Res) 707-696-5210 (Text)

EXHIBIT "A"

WARNING TO PERSON EXECUTING THIS DOCUMENT

THIS IS AN IMPORTANT LEGAL DOCUMENT. BEFORE EXECUTING THIS DOCUMENT, YOU SHOULD KNOW THESE IMPORTANT FACTS:

- 1. THIS DOCUMENT MAY PROVIDE THE PERSON YOU DESIGNATE AS YOUR ATTORNEY-IN-FACT WITH BROAD POWERS TO DISPOSE, SELL, CONVEY, AND ENCUMBER YOUR REAL AND PERSONAL PROPERTY.
- 2. THESE POWERS WILL EXIST FOR AN INDEFINITE PERIOD OF TIME UNLESS YOU LIMIT THEIR DURATION IN THIS DOCUMENT. THESE POWERS WILL CONTINUE TO EXIST NOTWITHSTANDING YOUR SUBSEQUENT DISABILITY OR INCAPACITY.
- 3. YOU HAVE THE RIGHT TO REVOKE OR TERMINATE THIS ENTIRE DURABLE POWER OF ATTORNEY AT ANY TIME.

Barbara June Campbell

STATE OF NEVADA)
) ss
COUNTY OF DOUGLAS)

On November 1240, 2020, before me, Delick Jowl , the undersigned Notary Public, personally appeared BARBARA JUNE CAMPBELL personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the within Durable Power of Attorney and acknowledged to me that he/she executed the same in his/her authorized capacity, and that by his/her signature on the within Durable Power of Attorney, the person or the entity upon behalf of which the person acted, executed the instrument.

WITNESS my hand and official seal.

NOTARY PURING



Delila Lowe NOTARY PUBLIC STATE OF NEVADA Appt. No. 20-9950-05 My Appt. Expires 07/15/2024

[SEAL]