



200306260106

Skagit County Auditor

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AFTER RECORDING MAIL TO:

Name Martene Clark
Address 15063 Erie St.
City / State Anacortes, WA 98221

Document Title(s): (or transactions contained therein)

1. contingent durable power
2. of attorney
- 3.
- 4.

Reference Number(s) of Documents assigned or released:

☐ Additional numbers on page _____ of document

Grantor(s): (Last name first, then first name and initials)

1. William M Clark
- 2.
- 3.
- 4.

5. ☐ Additional names on page _____ of document

Grantee(s): (Last name first, then first name and initials)

1. Overleaf M Clark
- 2.
- 3.
- 4.

5. ☐ Additional names on page _____ of document

Abbreviated Legal Description as follows: (i.e. lot/block/plat or section/township/range/quarter/quarter)

Ptk Lot 16 & Lots 17-21 Block 115
Fidalgo City

☐ Complete legal description is on page _____ of document

Assessor's Property Tax Parcel / Account Number(s):

4101-175-021-0005 P73248
4101-175-017-0001 P73247

NOTE: The auditor/recorder will rely on the information on the form. The staff will not read the document to verify the accuracy or completeness of the indexing information provided herein.

**First American Title
Insurance Company****FIRST AMERICAN TITLE CO.****B7U457E-1***(this space for title company use only)*

1
2
3 **CONTINGENT DURABLE POWER OF ATTORNEY**
4 **AND DIRECTIVE TO PHYSICIAN**

5 THE UNDERSIGNED, **WILLIAM M. CLARK**, (the Principal), domiciled
6 and residing in Anacortes, Skagit County, State of Washington, as
7 authorized by the Revised Code of Washington, Chapter 11.94,
8 designates the following named person(s) as Attorney-in-Fact to
9 act for the undersigned as the Principal who may hereafter become
10 disabled or incompetent.

11 1. **Designation.** The undersigned (the "Principal") design-
12 nates **CHARLENE M. CLARK** of 1211 12th Street, Anacortes, Washing-
13 ton as Attorney-in-Fact for the Principal. If **CHARLENE M. CLARK**
14 is deceased or is unable or unwilling to act, then **DUWAYNE OPITZ**
15 of 787 SW Riverview Place, Gresham, Oregon 97080, is designated
16 as alternate Attorney-in-Fact to act with the same authority,
17 rights, and obligations as the primary Attorney-in-Fact.

18 2. **Effectiveness; Duration.** This power of attorney shall
19 become effective upon receipt by the designated Attorney-in-Fact
20 of written evidence of the incompetency or disability of the
21 Principal as determined by a court of competent jurisdiction or
22 receipt of a written statement of determination of the disability
23 of the Principal which shall include the inability to effectively
24 manage his/her property and affairs for reasons such as mental
25 disability, physical illness or disability, advanced age, chronic
26 use of drugs, chronic intoxication, confinement, detention, or
27 disappearance. Such written statement shall be made by the then
28 regularly attending physician of the Principal or if there is no
regularly attending physician, by another qualified physician or
by other persons with knowledge of any confinement, detention, or
disappearance.

19 This power of attorney becomes effective as provided above
20 and shall remain in effect to the extent permitted by RCW 11.94
21 or until revoked or terminated under Paragraph 4, notwithstanding
22 any uncertainty as to whether the Principal is dead or alive.

23 3. **Powers.** The Attorney-in-Fact shall have all of the
24 powers of an absolute owner over the assets and liabilities of
25 the Principal whether located within or without the State of
26 Washington. These powers shall include, without limitation, the
27 power and authority specified below.

28 3.1 **Real Property.** The Attorney-in-Fact shall have the
authority to purchase, take possession of, lease, sell, convey,
exchange, mortgage, release and encumber real property or any
interest in real property, including my homestead interest in any
real property.



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1 **3.2 Personal Property.** The Attorney-in-Fact shall have
2 the authority to purchase, receive, take possession of, lease,
3 sell, assign, endorse, exchange, release, mortgage, and pledge
any personal property or any interest in personal property.

4 **3.3 Financial Accounts.** The Attorney-in-Fact shall have
5 the authority to deal with accounts maintained by or on behalf of
6 the Principal with institutions (including, without limitation,
7 banks, savings and loan associations, credit unions, and security
dealers). This shall include the authority to maintain and close
existing accounts; to open, maintain, and close other accounts;
and to make deposits, transfers, and withdrawals with respect to
all such accounts.

8 **3.4 United States Treasury Bonds.** The Attorney-in-Fact
9 shall have the authority to purchase United States Treasury Bonds
which may be redeemed at par in payment of federal estate tax.

10 **3.5 Monies Due.** The Attorney-in-Fact shall have the
11 authority to request, demand, recover, collect, endorse and
12 receive all monies, debts, accounts, gifts, bequests, dividends,
annuities, rents and payments due the Principal.

13 **3.6 Claims Against Principal.** The Attorney-in-Fact
14 shall have the authority to pay, settle, compromise, or otherwise
15 discharge any and all claims of liability or indebtedness against
16 the Principal and, in so doing, use any of the Principal's funds
or other assets or use funds or other assets of the Attorney-in-
Fact and obtain reimbursement out of the Principal's funds or
other assets.

17 **3.7 Legal Proceedings.** The Attorney-in-Fact shall have
18 the authority to participate in any legal action in the name of
19 the Principal or otherwise. This shall include (a) actions for
20 attachment, execution, eviction, foreclosure, indemnity, and any
other proceeding for equitable or injunctive relief and (b) legal
proceedings in connection with the authority granted in this
instrument.

21 **3.8 Written Instruments.** The Attorney-in-Fact shall
22 have the authority to sign, seal, execute, deliver and acknowl-
23 edge all written instruments and do and perform each and every
act and thing whatsoever which may be necessary or proper in the
exercise of the powers and authority granted to the Attorney-in-
Fact as fully as the Principal could do if personally present.

24 **3.9 Safe Deposit Box.** The Attorney-in-Fact shall have
25 the authority to enter any safe deposit box in which the Princi-
pal has a right of access.

26 **3.10 Informed Consent.** The Attorney-in-Fact shall have
27 the authority to execute an informed consent on behalf of the
28 conduct of medical tests, surgery, or other forms of health care
upon the recommendation of my attending physician(s) and to



1 execute all medical and hospital forms of consent in connection
2 therewith.

3 **3.11 Withdrawal of Life-Sustaining Procedures.** The
4 Attorney-in-Fact shall have the authority to sign, seal, execute,
5 deliver and acknowledge all written instruments and do and per-
6 form each and every act in saying whatsoever which may be neces-
7 sary or proper in the exercise of life-sustaining procedures in
8 accordance with the Natural Death Act, RCW 70.122.030, and any
9 amendments thereto, in accordance with the following instruc-
10 tions.

11 If at any time I should have a terminal condition and
12 my attending physician and another physician, indepen-
13 dently of each other, have determined there can be no
14 recovery from such condition and my death will occur as
15 a result of such condition, I direct, with the concu-
16 rence of my attorney-in-fact, that life prolonging
17 procedures be withheld, or withdrawn, and that I be
18 permitted to die naturally with only the administration
19 of medication or the performance of any medical proce-
20 dure deemed necessary to provide me with comfort, care,
21 or to alleviate pain. For purposes of this paragraph,
22 "life prolonging procedures" shall mean any medical
23 procedure, treatment or intervention which (1) utilizes
24 mechanical or other artificial means to sustain,
25 restore, or supplant a spontaneous vital function, or
26 is otherwise of such a nature as to afford a patient no
27 reasonable expectation of recovery from a terminal con-
28 dition, and (2) when applied to a patient in a terminal
condition, would serve only to prolong the dying pro-
cess. "Life-prolonging procedures" shall not include
the administration of medication or the performance of
any medical procedure deemed necessary to provide com-
fort, care, or to alleviate pain.

19 **Withdrawal of Nourishment.** If I should enter an
20 irreversible coma with no reasonable possibility of ever
21 regaining consciousness, I direct that all procedures
22 used to provide me with nourishment and water (includ-
23 ing, for instance, through intravenous feeding and
24 through endotracheal or nasogastric tube means) not be
25 instituted, or if already instituted, withdrawn.

26 **3.12 Qualifying for Benefits.** The Attorney-in-Fact shall
27 have the authority to transfer assets by gift or otherwise for
28 the purposes of the Principal qualifying for government benefits
including, but not limited to, Medicare and Medicaid.

29 **3.13 Transfers to Trust.** The attorney-in-fact shall have
the authority to transfer assets of all kinds to the Trustee of
any trust which:

a. has been created by the Principal, or

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1
2 b. is created by a third party and is for the sole
3 benefit of the Principal during Principal's lifetime and which
4 terminates at the Principal's death as to the Principal's prop-
erty with the Principal's property distributable to the Personal
Representative of the Principal's estate.

5 4. **Termination.** This power of attorney may be terminated by
6 the following:

7 a. The Principal by written notice to the Attorney-in-
8 Fact and if this power of attorney has been recorded, by recording
the written instrument of revocation in the office of the recorder
or auditor of the place where the power was recorded;

9 b. A guardian of the estate or the Principal after court
approval of such revocation; or

10 c. The death of the Principal upon actual knowledge or
11 receipt of written notice being received by the Attorney-in-Fact.

12 5. **Accounting.** Upon request of the Principal or the guard-
13 ian of the estate of the Principal or the personal representative
of the Principal's estate, the Attorney-in-Fact shall be required
14 to account for all actions taken by the Attorney-in-Fact for or
on behalf of the Principal.

15 6. **Reliance.** The designated and acting Attorney-in-Fact and
16 all persons dealing with the Attorney-in-Fact shall be entitled
to rely upon this power of attorney so long as neither the Attor-
17 ney-in-Fact, nor any person with whom they are dealing, at the
time of any act taken pursuant to this power of attorney had
18 received actual knowledge or actual notice of any revocation,
suspension, or termination of the power of attorney, by death or
19 otherwise. Any actions so taken, unless otherwise invalid or
unenforceable, shall be binding on the heirs, devisees, legatees,
or personal representatives of the Principal.

20 7. **Indemnity.** For all acts done in good faith, the Attor-
21 ney-in-Fact shall incur no personal liability for acts done pur-
suant to this power of attorney and on behalf of the Principal,
22 and Principal's estate shall hold harmless and indemnify the
Attorney-in-Fact from all liability for acts done in accordance
23 therewith.

24 8. **Revocation of Prior Powers of Attorney.** This document
25 hereby revokes any power of attorney previously executed (signed)
by the undersigned.

26 9. **Nomination of Guardian.** In the event that a guardianship
27 or a limited guardianship of the person or estate of the Princi-
pal is necessary, the Principal designates the Attorney-in-Fact
28 designated herein to serve in that role subject to the confirma-
tion of the court



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1
2 10. **Applicable Law.** The laws of the State of Washington
3 shall govern this power of attorney.

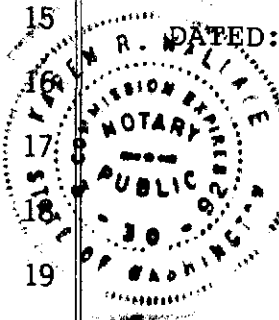
4 11. **Execution.** This power of attorney is executed on the
5 date set forth below. The Principal's county of residence is
6 Skagit County.

7 DATED this 27th day of Dec, 1991.

8 William M Clark
9 WILLIAM M. CLARK, Principal

10
11 STATE OF WASHINGTON)
12) ss
13 COUNTY OF SKAGIT)

14 I certify that I know or have satisfactory evidence that
15 WILLIAM M. CLARK signed this instrument and acknowledged it to be
16 his free and voluntary act for the uses and purposes mentioned in
17 the instrument.



DATED: 12/27/91

Karen R Wallace
Notary Public in and for the State of
Washington, residing at Julia-Worley.

My appointment expires: 3-31-92.

21 Each of the undersigned, in the presence of the person making the
22 directive set forth in paragraph 3.10 and 3.11, and under penalty
23 of perjury under the laws of Washington, states as follows:

24 I am over the age of 18 years. I am not related to the person
25 making this directive and I am not entitled to any portion of
26 that person's estate. I am not the attending physician, nor am I
27 employed by the attending physician, or by the health facility
28 to which the person making this directive is a patient. I



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1 am competent to be a witness. I have personally known WILLIAM M.
2 CLARK, whom I believe to be of sound mind and who signed this
3 directive in my presence.

4 Judy L. Kussie
5 Witness

6 1204 34th
7 Address

8 Anacortes, WA 98221

9 Dec. 27, 1991
10 Date

11 Greg E. Anderson
12 Witness

13 2102 10th
14 Address

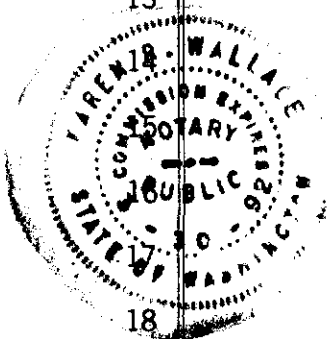
15 Anacortes, wa 98221

16 12-27-91
17 Date

18 SIGNED AND SWORN to (or affirmed) before me on this 27th
19 day of December, 1991.

20 Karen R. Wallace
21 Notary Public in and for the State of
22 Washington, residing at Leche-Wally.

23 My appointment expires: 3-30-92.



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