

After Recording, please return to:

Land Title and Escrow Company
111 East George Hopper Road, PO Box 445
Burlington, WA 98233
209189-LT

Document Title(s): General Durable Power of Attorney
Reference Number(s) of Documents assigned or released: (on page __ of document(s))
Grantor(s): Sybil J. Burgess
Additional Names on page ___ of document.
Grantee(s): Robert L. Burgess
Additional Names on page ___ of document.
Abbreviated Legal Description: ptn NW NW, 22-35-4 E W.M.
Additional legal is on page ___ of document.
Tax Parcel Number(s): 350422-2-005-0000/P37078

RECORDED AT THE REQUEST OF:

Stiles & Lehr Inc., P.S.
P.O. Box 228
Sedro-Woolley, Washington 98284

GENERAL DURABLE POWER OF ATTORNEY

Sybil J. Burgess, the undersigned individual, domiciled and residing in the State of Washington, designates the following named person as Attorney in Fact to act for the undersigned as the Principal, and revoke all former Power of Attorneys, whether for medical purposes, financial purposes or otherwise.

1. Designation. Robert L. Burgess and Karen Ann Cooper are designated as Attorneys in Fact, who may act jointly or individually, and the action of one attorney in fact is as valid as if they were the sole attorney in fact.

2. Powers.

(a) General Powers. 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. Without limiting the powers herein, the Attorney in Fact shall have full power, right and authority to sell, lease, rent, exchange, mortgage and otherwise deal in and with any and all property, real or personal, belonging to the Principal the same as if he or she were the absolute owner thereof. In addition, the Attorney in Fact shall have specific powers including, but not limited to, the following:

(i) Accounts Receivable: To demand, sue for, recover, collect and receive all sums of money, debts, accounts, legacies, rents, interest, dividends, annuities, insurance proceeds and other intangible amounts which are now due or shall hereafter become due, and which belong to me and to use all

lawful means for the recovery thereof, including but not limited to levy, attachment, and garnishment, and to compromise and settle any claims for funds due me.

(ii) Accounts Payable: To pay any just and lawful debt, account, rent, interest, Principal, judgments or other demands which are now due or may hereafter become due, owing or payable by me.

(iii) Claims Against Principal: The Attorney in Fact shall have authority to pay, settle, compromise or otherwise discharge any and all claims of liability or indebtedness against the Principal and, in so doing, use any of the assets of the Attorney in Fact and obtain reimbursement out of the Principal's funds or other assets.

(iv) Beneficiary Designations. The Attorney in Fact shall have authority to make, amend, alter or revoke any of the Principal's life insurance beneficiary designations and retirement plan beneficiary designations so long as in the sole discretion of the Attorney in Fact such action would be in the best interests of the Principal and those interested in the Principal's estate.

(v) Transfers to Trust. The Attorney in Fact shall have the authority to make transfers of the Principal's property, both real and personal, to any trust created by the Principal of which the Principal is the primary beneficiary during the Principal's lifetime.

(vi) Legal Proceedings. The Attorney in Fact shall have authority to participate in any legal action in the name of the Principal or otherwise. This shall include (1) actions for attachment, execution, eviction, foreclosure, indemnity and any other proceedings for equitable or injunctive relief; and (2) legal proceedings in connection with the authority granted in this instrument.

(vii) Real Estate: To agree to purchase, sell or convey any real estate or interest therein by written earnest money agreement or other written document, to purchase, sell or convey real estate or any interest therein by deed, real estate contract or other appropriate document, to take possession of any real estate owned by me by any lawful means and to institute suit for such possession if necessary. In this regard, my Attorney in Fact shall have the right to institute suit for unlawful detainer, foreclosure of mortgage or quiet title and to forfeit any real estate contract or foreclose any deed of trust by judicial or nonjudicial means, to rent real estate for my use or rent any real estate belonging to me to others and execute any rental agreements or leases on my behalf, to plat, subdivide and develop any real estate owned by me and to dedicate any plat, street, alley or public way, to authorize and contract for any improvements to or repairs to real estate owned by me. To carry out the terms of this paragraph and without limiting the authority of my Attorney in Fact, my Attorney in Fact shall have the

authority to execute any and all documents on my behalf including but not limited to, escrow, collection and closing instructions, closing statements and loan applications.

(viii) Personal Property: To agree to purchase or sell any personal property or interest therein by written document, to purchase or sell any personal property or interest therein by bill of sale or other appropriate document, to rent personal property for my use or rent personal property belonging to me to others and execute any rental agreements or leases on my behalf, to take possession of any personal property owned by me by any lawful means and to institute suit for such possession if necessary to authorize and contract for any improvements to or repairs to personal property owned by me.

(ix) Loans and Investments: To loan and invest any monies now in my possession or hereafter acquired by me and to accept any note, mortgage, deed of trust or security interest in any tangible or intangible personal property as my Attorney in Fact shall think fit and to release, satisfy or reconvey in whole or in part any such security interest.

(x) Borrowing: To borrow any funds in my name, secured or unsecured, in such amount and upon such terms and conditions as my Attorney in Fact shall think fit, and to execute any note, mortgage, deed of trust, or security interest in any tangible or intangible personal property in such manner as my Attorney in Fact shall think fit.

(xi) Bank Accounts: To make deposits to and withdrawals from and to open and close any savings or checking account or any certificate of deposit or money market fund or investment in my name alone, or in my name and the names of others, and to carry out the terms of this paragraph, to endorse my name on any check, draft or money order for deposit into such account.

(xii) Safe Deposit Box: To have access to the contents of any safe deposit box in my name or in my name and the names of others.

(xiii) Business or Farm Property: To operate any business or farm property in such manner as my Attorney in Fact shall think fit, including the right to exercise with respect to the management and disposition thereof all of my rights and powers, including the authority to broaden, limit or change the scope or nature of the business or farm property.

(xiv) Gifts: My Attorney in Fact is authorized to make annual gifts to my spouse and to any lawful descendant of mine, provided such gift shall not exceed the annual gift tax exclusion allowed by the Internal Revenue Code or the law of any state in which I am domiciled at the time such gift is made. In making any such gift my Attorney in Fact shall consider a pattern of giving established by me,

my ability to continue making such gift or gifts, my continued health and well-being, the impact of inflation upon the value of such gifts, reduction of death taxes at the time of my death and other estate planning considerations. My attorney in fact shall not breach any fiduciary duty to me by reason of gifts made or withheld in good faith.

(xv) Disclaimers: My Attorney in Fact is authorized to disclaim pursuant to the laws of the State of Washington and the Internal Revenue Code all or any assets, property or interests to which I might be entitled as a beneficiary. In disclaiming, my Attorney in Fact may rely with acquittance on the advice of my attorney regarding my estate planning objectives.

(xvi) Estate Planning: My Attorney in Fact is granted the authority to revoke on my behalf any community property agreement, joint tenancy agreement or revocable trust. I do not intend that my Attorney in Fact change my estate plan, keeping in mind, however, the fact that tax and distribution laws change and the needs of my spouse and descendants may change and to that end, I grant my Attorney in Fact the power set forth in this paragraph for the purpose of reducing death taxes and to facilitate the transfer of property at the time of my death.

(b) Health Care Decisions.

(i) General Statement of Authority Granted. The Attorney in Fact shall have full power and authority to make health care decisions for the Principal to the same extent that the Principal could make such decisions for the Principal if the Principal had the capacity to do so. In exercising this authority, the Attorney in Fact shall make health care decisions that are consistent with the Principal's desires as stated in this document or otherwise made known to the Attorney in Fact, including, but not limited to, the Principal's desires concerning obtaining or refusing or withdrawing life-prolonging care, treatment, services, and procedures. "Health care decisions" shall include consent, refusal of consent, or withdrawal of consent to any care, treatment, service, or procedure to maintain, diagnose, or treat the Principal's physical condition.

(ii) Inspection and Disclosure of Health Information. The Attorney in Fact has the power and authority to do all of the following:

(A) Request, review, and receive any information verbal or written, regarding the Principal's physical or mental health, including, but not limited to, medical and hospital records.

(B) Execute, on the Principal's behalf, any releases or other documents that may be required in order to obtain the above information.

(C) Consent to the disclosure of the above information.

(D) I intend for my Attorney in Fact to be treated as I would with regard to the use and dissemination of my individually identifiable health information and medical records ("Protected Health Information"). This authority applies to any information governed by the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"), 42 USC 1320d and 45 CFR 160-164. I specifically authorize: any physician, dentist, other health care professional or medical provider, health plan, hospital, clinic, laboratory, pharmacy or other health care provider, any insurance company and the Medical Information Bureau, Inc. or other health care organization that has provided treatment or services to me or that has paid for or is seeking payment from me for such services, to give, disclose and release such Protected Health Information to my Attorney in Fact to disclose all of my Protected Health Information regarding any past, present or future medical or mental health condition, to include all information relating to the diagnosis and treatment of HIV/AIDS, sexually transmitted diseases, mental illness and drug or alcohol abuse, to my Attorney in Fact.

(E) Consent to the donation of any of the Principal's organs for medical purposes.

(iii) **Signing Documents, Waivers, and Releases.** Where necessary to implement the health care decisions that the Attorney in Fact is authorized by this document to make, the Attorney in Fact has the power and authority to exercise and execute, on the Principal's behalf, all of the following:

(A) Documents titled or purporting to be a "Refusal to Permit Treatment" and "Leaving Hospital Against Medical Advice."

(B) Any necessary waiver or release from liability required by a hospital or physician.

(iv) **Prior Designations Revoked.** This durable power of attorney revokes any prior durable power of attorney for health care.

(v) **HIPAA and Federal Privacy Act Release Authority.** (Effective upon execution of this instrument and without proof of my incapacity.) I intend for my Agent named in this Power of Attorney to be treated as I would be with respect to my rights regarding the use and disclosure of my individually identifiable personal financial, health and mental health information or other personal financial, health and mental health records. This release authority applies to any information governed by the Health Insurance Portability and Accountability Act of 1996

(a.k.a HIPAA), 42 U.S.C. § 1320d and 45 C.F.R. §§160-164 and The Privacy Act of 1974, 5 U.S.C. §552a, as amended. I authorize any financial institution, including but not limited to banks, savings and loan associations, credit union, investment brokerage, as well as any physician, health care professional, dentist, health plan, hospital, clinic, laboratory, pharmacy or other covered health care provider, any insurance company and the Medical Information Bureau Inc. or other health care clearinghouse that has provided financial services or health or mental health treatment or services to me or that has paid for or is seeking payment from me for such services; to give, disclose and release to my Agent, without restriction; all of my individually identifiable personal financial, health and mental health information and records regarding any past, present or future financial transaction or financial services or any records and information regarding my treatment or my medical or mental health condition. The authority given my Agent shall supersede any prior agreement that I may have made with my financial service providers and health care providers to restrict access to or disclosure of my individually identifiable personal information to any Agent named herein. The authority given my Agent has no expiration date and shall expire only in the event that I revoke the authority in writing and deliver it to my financial service or health care provider.

3. Intent to Obviate Need for Guardianship. It is the Principal's intent that the powers given to the Attorney in Fact designated herein are interpreted to be so broad as to obviate the need for the appointment of a guardian for the person or estate of the Principal. If the appointment of a guardian or limited guardian of the person or estate of the Principal is sought, however, the Principal nominates the then acting Attorney in Fact designated above, if any, as the Principal's guardian or limited guardian, or if no one is then acting as Attorney in Fact, the Principal nominates the persons designated above as Attorney in Fact and alternate Attorney in Fact as guardian or limited guardian, in the same order of priority.

4. Effectiveness. This Power of Attorney shall become effective immediately and shall not be affected by disability of the Principal.

5. Duration. This Power of Attorney becomes effective as provided in Section 4 and shall remain in effect to the extent permitted by the laws of the State of Washington or until revoked or terminated under Sections 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, and if the same has been recorded, then by recording the written instrument of revocation with the Auditor of the county where the Power of Attorney is 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 as to the powers enumerated in subsection (a) of Section 2 herein. The appointment of a guardian of the person empowers the guardian to revoke, suspend or terminate, with court approval, those powers concerning health care decisions as enumerated in subsection (b) of Section 2 herein.

(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 subsequently appointed personal representative or guardian.

9. 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 or she 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 Principal. In addition, third parties shall be entitled to rely upon a photocopy of the signed original hereof, as opposed to a certified copy of the same.

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.

12. Execution. This Power of Attorney is signed on April 30, 2021


Sybil J. Burgess
DOB: October 14, 1927

State of Washington) ss.
County of Skagit)

I certify that I know or have satisfactory evidence that Sybil J. Burgess is the person who appeared before me, and said person acknowledged that she signed this instrument and acknowledged it to be her free and voluntary act for the uses and purposes mentioned in the instrument.

Dated on April 30, 2021



Brock D Stiles
Notary Public in and for the
State of Washington, residing in
Sedro Woolley
commission expires: 6-20-2022