

After recording return to:
Land Title and Escrow
3010 Commercial Avenue
Anacortes, WA 98221

Reference: 60028695-352

DOCUMENT TITLE(S):

Washington Durable Power of Attorney

REFERENCE NUMBER(S) OF DOCUMENTS ASSIGNED OR RELEASED:

GRANTOR(S):

Mary Dowden

GRANTEE(S):

Peter Dowden

TRUSTEE:

ABBREVIATED LEGAL DESCRIPTION:

Lot 3, Malland Meadows

TAX PARCEL NUMBER(S):

4787-000-003-0000/P118708

WASHINGTON DURABLE POWER OF ATTORNEY

IMPORTANT INFORMATION

This power of attorney authorizes another person(s) (your agent(s)) to make decisions concerning your property for you (the principal). Your agent(s) will be able to make decisions and act with respect to your property (including your money) whether or not you are able to act for yourself.

This power of attorney does not authorize the agent(s) to make medical and health care decisions for you.

You should select someone you trust to serve as your agent(s). Unless you specify otherwise, generally the agent's authority will continue until you die or revoke the power of attorney or the agent(s) resigns or is unable to act for you.

Your agent(s) is entitled to reasonable compensation unless you state otherwise in the Special Instructions.

This form provides for the designation of two agents. If you wish to name more than two agents, you may name the additional agents in the Special Instructions.

If your agent(s) is unable or unwilling to act for you, your power of attorney will end unless you have named a successor agent. You may also name a second successor agent.

If you have questions about the power of attorney or the authority you are granting to your agent(s), you should seek legal advice before signing this form.

DESIGNATION OF AGENT(S)

I, MARY DOWDEN of 5007 DOON WAY, ANACORTES, Washington, WA 98221, authorize PETER BOWEN DOWDEN of 5007 DOON WAY, ANACORTES, WA, WA 98221, as my agent(s) (attorney-in-fact(s)) to act for me and in my name, stead, and for my use and benefit. If my agent is unable or unwilling to act for me, I name _____ of _____, _____, _____, as my successor agent(s).

I hereby give notice that I have revoked, and do hereby revoke, any previous power of attorney given or empowering another agent to act as my true and lawful attorney in fact. I declare that all power and authority granted under said power of attorney is hereby revoked and withdrawn.

GRANT OF GENERAL AUTHORITY

I grant my agent(s) and any successor agent(s) general authority to act for me with respect to the following subjects:

INITIAL each subject you want to include in the agent's general authority.

INITIAL the line in front of "(N) All Preceding Subjects" if you wish to grant general authority over all of the subjects instead of initialing each subject.

- ☒ _____ (A) Real property
- ☒ _____ (B) Tangible personal property
- ☒ _____ (C) Stocks and bonds
- ☒ _____ (D) Commodities and options
- ☒ _____ (E) Banks and Other Financial Institutions
- ☒ _____ (F) Operation of Entity or Business
- ☒ _____ (G) Insurance and Annuities
- ☒ _____ (H) Estates, Trusts, and Other Beneficiary Interests
- ☒ _____ (I) Claims and Litigation
- ☒ _____ (J) Personal and Family Maintenance
- ☒ _____ (K) Benefits from Governmental Programs or Civil or Military Service
- ☒ _____ (L) Retirement Plans
- ☒ _____ (M) Taxes
- ☒ _____ (N) All Preceding Subjects

GRANT OF SPECIFIC AUTHORITY (OPTIONAL)

My agent(s) may not do any of the following specific acts for me unless I have INITIALED the specific authority listed below:

INITIAL only the specific authority you want to give your agent(s).

- ☐ _____ (A) Make, amend, alter or revoke any of the principal's life insurance, annuity, or similar contract beneficiary designations, employee benefit plan beneficiary designations, trust agreements, registration of the principal's securities in beneficiary form, payable on death or transfer on death

beneficiary designations, designation of persons as joint tenants with right of survivorship with the principal with respect to any of the principal's property, community property agreements, transfer on death deeds, or any other provisions for non-probate transfer at death contained in non-testamentary instruments described in Revised Code Washington Section 11.02.091

☐ _____ (B) Make any gifts of property owned by the principal

☐ _____ (C) Exercise the principal's rights to distribute property in trust or cause a trustee to distribute property in trust to the extent consistent with the terms of the trust agreement

☐ _____ (D) Make transfers of property to any trust (whether or not created by the principal) unless the trust benefits the principal alone and does not have dispositive provisions which are different from those which would have governed the property had it not been transferred into the trust

☐ _____ (E) Disclaim property

LIMITATION ON AGENT'S AUTHORITY

An agent that is not my ancestor, spouse, or descendant may **not** use my property to benefit the agent or a person to whom the agent owes an obligation of support unless I have included that authority in the Special Instructions.

SPECIAL INSTRUCTIONS (OPTIONAL)

You may give special instructions on the following lines:

EFFECTIVE DATE

This power of attorney is effective immediately.

TERMINATION

This power of attorney shall not be affected by my subsequent disability or incapacity, or lapse of time.

NOMINATION OF GUARDIAN (OPTIONAL)

If it becomes necessary for a court to appoint a guardian of my estate or my person, I nominate the following person(s) for appointment:

Name of Nominee for guardian of my estate: _____

Nominee's Address: _____, _____, _____

Nominee's Telephone Number: _____

Name of Nominee for guardian of my person: _____

Nominee's Address: _____, _____, _____

Nominee's Telephone Number: _____

RELIANCE ON THIS POWER OF ATTORNEY

Any person, including my agent(s), may rely upon the validity of this power of attorney or a copy of it unless that person knows it has terminated or is invalid.

SIGNATURE AND ACKNOWLEDGMENT

Principal's Signature: Mary Dowden Date: 12/29/25

Principal's Name Printed: MARY DOWDEN

Principal's Address: 5007 DOON WAY, ANACORTES, Washington, WA 98221

Principal's Telephone Number: (360) 293-7836

NOTARY PUBLIC

State of Washington
County of Skagit

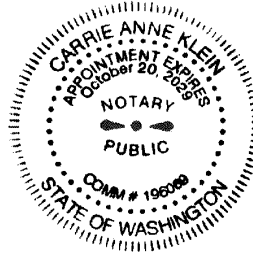
This document was acknowledged before me on 12/29/2025, by MARY DOWDEN.

Signature of Notary Carie-Anne Klevi

(Seal, if any)

My commission expires: 10/20/2029

This document prepared by: PETER BOWEN DOWDEN



IMPORTANT INFORMATION FOR AGENT(S)

Agent's Duties

When you accept the authority granted under this power of attorney, a special legal relationship is created between you and the principal. This relationship imposes upon you legal duties that continue until you resign or the power of attorney is terminated or revoked. You must:

- (1) do what you know the principal reasonably expects you to do with the principal's property or, if you do not know the principal's expectations, act in the principal's best interest;
- (2) act in good faith;
- (3) do nothing beyond the authority granted in this power of attorney; and
- (4) disclose your identity as an agent whenever you act for the principal by writing or printing the name of the principal and signing your own name as "agent" in the following manner:

(Principal's Name) by (Your Signature) as Agent

Unless the Special Instructions in this power of attorney state otherwise, you must also:

- (1) act loyally for the principal's benefit;
- (2) avoid conflicts that would impair your ability to act in the principal's best interest;
- (3) act with care, competence, and diligence;
- (4) keep a record of all receipts, disbursements, and transactions made on behalf of the principal;
- (5) cooperate with any person that has authority to make health care decisions for the principal to do what you know the principal reasonably expects or, if you do not know the principal's expectations, to act in the principal's best interest; and attempt to preserve the principal's estate plan if you know the plan and preserving the plan is consistent with the principal's best interest.

Termination of Agent's Authority

You must stop acting on behalf of the principal if you learn of any event that terminates this power of attorney or your authority under this power of attorney. Events that terminate a power of attorney or your authority to act under a power of attorney include:

- (1) death of the principal;
- (2) the principal's revocation of the power of attorney or your authority;
- (3) the occurrence of a termination event stated in the power of attorney;
- (4) the purpose of the power of attorney is fully accomplished; or

(5) if you are married to the principal, a legal action is filed with a court to end your marriage, or for your legal separation, unless the Special Instructions in this power of attorney state that such an action will not terminate your authority.

Liability of Agent(s)

The meaning of the authority granted to you is defined in the Washington Revised Code Annotated, Chapter 11.94. If you violate the Washington Revised Code Annotated, Chapter 11.94, or act outside the authority granted, you may be liable for any damages caused by your violation.

If there is anything about this document or your duties that you do not understand, you should seek legal advice.

AGENT'S CERTIFICATION AS TO THE VALIDITY OF POWER OF ATTORNEY AND AGENT'S AUTHORITY

State of Washington
County of Snohomish

I, PETER BOWEN DOWDEN, certify under penalty of perjury that MARY DOWDEN granted me authority as an agent or successor agent in a power of attorney dated 12/29/2025.

I, further certify that to my knowledge:

- (1) I am acting in good faith pursuant to the authority given under the power of attorney;
- (2) The principal is alive and has not terminated, revoked, limited, or modified the power of attorney or my authority to act under the power of attorney; nor has the power of attorney or my authority to act under the power of attorney been terminated, revoked, limited, or modified by any other circumstances;
- (3) When the power of attorney was signed, the principal was competent to execute it and was not under undue influence to sign;
- (4) All events necessary to making the power of attorney effective have occurred;
- (5) If I was married or a registered domestic partner of the principal when the power of attorney was executed, there has been no subsequent dissolution, annulment, or legal separation, and no action is pending for the dissolution of the marriage or domestic partnership or for legal separation;
- (6) If the power of attorney was drafted to become effective upon the happening of an event or contingency, the event or contingency has occurred;
- (7) If I was named as a successor agent, the prior agent is no longer able or willing to serve, or the conditions stated in the power of attorney that cause me to become the acting agent have occurred; and
- (8) _____

SIGNATURE AND ACKNOWLEDGMENT OF AGENT(S)

Agent's Signature Peter Bowen Dowden Date 12/29/25

Agent's Name Printed: PETER BOWEN DOWDEN

Agent's Address: 5007 DOON WAY, ANACORTES, WA, WA 98221

Agent's Telephone Number: (360) 293-7836

NOTARY PUBLIC

State of Washington
County of Skagit

This document was acknowledged before me on 12/29/2025, by PETER BOWEN DOWDEN.

Signature of Notary Carrie-Anne Klein
(Seal, if any)

My commission expires: 10/20/2029
This document prepared by: PETER BOWEN DOWDEN

