

**GENERAL DURABLE POWER OF ATTORNEY
(Effective Upon Disability)**

KNOW ALL MEN BY THESE PRESENTS, that I, **CALVIN D. MITCHELL**, now residing at 13356 E. 47th Street, Yuma, Arizona 85367, do hereby nominate, constitute, and appoint, **ANNIE M. MITCHELL**, residing at 13356 E. 47th Street, Yuma, Arizona 85367, as my true and lawful attorney in fact, for me and in my name, place and stead, and for my use and benefit. oc //

To ask, demand, sue for, recover, collect and receive all such sums of money, debts, dues, accounts, legacies, bequests, interest, dividends, annuities, employee benefits, insurance benefits and demands whatsoever as are now or shall hereafter become due, owing, payable or belonging to me and have, use and take all lawful ways and means in my name or otherwise for the recovery thereof, by attachments, arrests, distress, or otherwise, and to compromise and agree for the same and give acquittances or other sufficient discharges and releases;

For me and in my name, to make, execute and deliver, to bargain, contract, agree for, purchase, receive and take lands and all or any interest in property, and accept the possession of all kinds, and all or any interest in property, and all deeds and other assurances, in the law therefor, and to lease, let, demise, bargain, sell, release, convey, mortgage, and hypothecate lands, and all or any interest in property, upon such terms and conditions and under such covenants as he shall think fit;

Also to bargain and agree for, buy, sell, mortgage, hypothecate and in any and every way and manner deal in and with goods, wares and merchandise, choses in action, and other property in possession or in action, and to make, do and transact all and every kind of business of whatsoever nature and kind;

And also to make withdrawals from or deposits to any bank account or savings or loan account or other cash account in my name; and to enter and have free access to any safe deposit box in my name for the purpose of adding property thereto or removing property therefrom;

Giving and Granting unto my said attorney in fact full power and authority to do and perform every act necessary, requisite or proper to be done in and about the premises as fully as I might or could do if personally present, with full power of substitution and revocation, hereby ratifying and confirming all that my said attorney shall lawfully do or cause to be done by virtue hereof.

EXCEPT my said attorney-in-fact may not make a gift of any portion of my assets to himself or his immediate family.

TERMINATION/REVOCATION

This General Power of Attorney shall not expire until revoked by recording a Revocation, and it shall be considered to be renewed and effective until revoked by recording a Revocation of Power of Attorney in the county of my residence. The failure of the Principal to record this Revocation shall be construed as a renewal of the Power of Attorney.

EFFECTIVE UPON DISABILITY

This power of attorney shall become effective upon my disability.

DETERMINATION OF DISABILITY

Disability or incompetency, for purposes of this document, shall be established by written certification by an attending physician, psychiatrist or psychologist of the principal, that the principal is no longer capable of exercising rational decision-making over financial matters.

IN WITNESS WHEREOF, I have hereunto signed my name this 16 day of February, 1999.

Calvin D. Mitchell
Calvin D. Mitchell

WITNESS STATEMENT: The undersigned declare that the foregoing General Durable Power of Attorney was signed and acknowledged before them by **CALVIN D. MITCHELL**, and that they are not an Agent appointed therein, nor the spouse of any such Agent, nor the child of any such Agent.

WITNESS NO. 1

Signature: Maryann C. Warner Date: 2/16/99
Print Name: Maryann C. Warner Telephone: 520 783-8321
Address: 2260 S. 4th Ave #2001 Yuma, AZ

WITNESS NO. 2

Signature: Wade Noble Date: 2-16-99
Print Name: WADE NOBLE Telephone: 520-783-8321
Address: 2260 S. 4th Ave #2001 Yuma AZ 85369

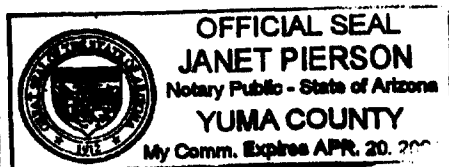
STATE OF ARIZONA)
) ss.
County of YUMA)

On this 16th day of February, 1999, before me, the undersigned Notary Public, personally appeared **CALVIN D. MITCHELL**, known to me (or satisfactorily proven) to be the person whose name is subscribed to the foregoing instrument, and acknowledged that he executed the same for the purpose therein contained.

IN WITNESS WHEREOF, I hereunto set my hand and official seal.

My Commission Expires: 4-20-01

Janet Pierson
Notary Public



State of Oregon, County of Klamath
Recorded 04/17/01, at 1:58 p.m.
In Vol. M01 Page 16411
Linda Smith,
County Clerk Fee\$ 26⁰⁰