

WTC 92773-DS

2012-003578

Klamath County, Oregon



00116300201200035780130130

04/05/2012 03:27:54 PM

Fee: \$97.00

**RECORDING COVER SHEET**

THIS COVER SHEET HAS BEEN PREPARED BY THE  
PERSON PRESENTING THE ATTACHED INSTRUMENT  
FOR RECORDING. ANY ERRORS IN THIS COVER SHEET  
DO NOT AFFECT THE TRANSACTION(S) CONTAINED  
IN THE INSTRUMENT ITSELF.

**After Recording Return To:**

Kelley Gipson  
23 Glenwood Rd.  
Scarsdale, NY 10583

**1. Name(s) of the Transaction(s):**

POWER OF ATTORNEY  
NEW YORK STATUTORY SHORT FORM

**2. Direct Party (Grantor):**

JEANNE S. GIPSON

**3. Indirect Party (Grantee):**

KELLEY GIPSON

**4. True and Actual Consideration Paid:**

**5. Legal Description:**

97Amt

**POWER OF ATTORNEY  
NEW YORK STATUTORY SHORT FORM**

---

**PRINCIPAL: JEANNE S. GIPSON**

**(a) CAUTION TO THE PRINCIPAL:**

Your Power of Attorney is an important document. As the "principal," you give the person whom you choose (your "agent") authority to spend your money and sell or dispose of your property during your lifetime without telling you. You do not lose your authority to act even though you have given your agent similar authority.

When your agent exercises this authority, he or she must act according to any instructions you have provided or, where there are no specific instructions, in your best interest. "Important Information for the Agent" at the end of this document describes your agent's responsibilities.

Your agent can act on your behalf only after signing the Power of Attorney before a notary public.

You can request information from your agent at any time. If you are revoking a prior Power of Attorney, you should provide written notice of the revocation to your prior agent(s) and to any third parties who may have acted upon it, including the financial institutions where your accounts are located.

You can revoke or terminate your Power of Attorney at any time for any reason as long as you are of sound mind. If you are no longer of sound mind, a court can remove an agent for acting improperly.

Your agent cannot make health care decisions for you. You may execute a "Health Care Proxy" to do this.

The law governing Powers of Attorney is contained in the New York General Obligations Law, Article 5, Title 15. This law is available at a law library, or online through the New York State Senate or Assembly websites, [www.senate.state.ny.us](http://www.senate.state.ny.us) or [www.assembly.state.ny.us](http://www.assembly.state.ny.us).

If there is anything about this document that you do not understand, you should ask a lawyer of your own choosing to explain it to you.

RETURN BY MAIL TO:

KILMARTIN & KILMARTIN  
876 McLean Avenue  
Yonkers, NY 10704  
Telephone: 914-237-6000

**(b) DESIGNATION OF AGENT(S):**

I, **JEANNE S. GIPSON**, residing at 1017 Saw Mill River Parkway, #1454, Ardsley, NY 10502, hereby appoint:

(name and address of principal)

**KELLEY GIPSON** residing at 23 Glenwood Road, Scarsdale, NY, and as my agent(s)  
(name and address of agent(s))

If you designate more than one agent above, they must act together unless you initial the statement below.

(        ) My agents may act SEPARATELY.

**(c) DESIGNATION OF SUCCESSOR AGENT(S): (OPTIONAL)**

If any agent designated above is unable or unwilling to serve, I appoint as my successor agent(s):

---

(name(s) and address(es) of successor agent(s))

Successor agents designated above must act together unless you initial the statement below.

(        ) My successor agents may act SEPARATELY.

You may provide for specific succession rules in this section. Insert specific succession provisions here:

---

---

---

**(d)** This POWER OF ATTORNEY shall not be affected by my subsequent incapacity unless I have stated otherwise below, under "Modifications".

**(e)** This POWER OF ATTORNEY does not revoke any Powers of Attorney previously executed by me unless I have stated otherwise below, under "Modifications."

If you do NOT intend to revoke your prior Powers of Attorney, and if you have granted the same authority in this Power of Attorney, as you granted to another agent in a prior Power of Attorney, each agent can act separately unless you indicate under "Modifications" that the agents with the same authority are to act together.

**(f) GRANT OF AUTHORITY:**

To grant your agent some or all of the authority below, either (1) Initial the bracket at each authority you grant, or (2) Write or type the letters for each authority you grant on the blank line at (P), and initial the bracket at (P). If you initial (P), you do not need to initial the other lines.

I grant authority to my agent(s) with respect to the following subjects as defined in sections 5-1502A through 5-1502N of the New York General Obligations Law:

- ☐ (A) real estate transactions;
- ☐ (B) chattel and goods transactions;
- ☐ (C) bond, share, and commodity transactions;
- ☐ (D) banking transactions;
- ☐ (E) business operating transactions;
- ☐ (F) insurance transactions;
- ☐ (G) estate transactions;
- ☐ (H) claims and litigation;
- ☐ (I) personal and family maintenance. If you grant your agent this authority, it will allow the agent to make gifts that you customarily have made to individuals, including the agent, and charitable organizations. The total amount of all such gifts in any one calendar year cannot exceed five hundred dollars;
- ☐ (J) benefits from governmental programs or civil or military service;
- ☐ (K) health care billing and payment matters; records, reports, and statements;
- ☐ (L) retirement benefit transactions;
- ☐ (M) tax matters;
- ☐ (N) all other matters;
- ☐ (O) full and unqualified authority to my agent(s) to delegate any or all of the foregoing powers to any person or persons whom my agent(s) select;
- ☒ (P) EACH of the matters identified by the following letters "A" through "P".  
You need not initial the other lines if you initial line (P).

**(g) MODIFICATIONS: (OPTIONAL)**

In this section, you may make additional provisions, including language to limit or supplement authority granted to your agent. However, you cannot use this Modifications section to grant your agent authority to make gifts or changes to interests in your property. If you wish to grant your agent such authority, you MUST complete the Statutory Gifts Rider.

**(h) CERTAIN GIFT TRANSACTIONS: STATUTORY GIFTS RIDER (OPTIONAL)**

In order to authorize your agent to make gifts in excess of an annual total of \$500 for all gifts described in (i) of the grant of authority section of this document (under personal and family maintenance), you must initial the statement below and execute a Statutory Gifts Rider at the same time as this instrument. Initialing the statement below by itself does not authorize your agent to make gifts. The preparation of the Statutory Gifts Rider should be supervised by a lawyer.

☒ (SGR) I grant my agent authority to make gifts in accordance with the terms and conditions of the Statutory Gifts Rider that supplements this statutory Power of Attorney.

**(i) DESIGNATION OF MONITOR(S): (OPTIONAL)**

If you wish to appoint monitor(s), initial and fill in the section below:

( ) I wish to designate \_\_\_\_\_,  
whose address(es) is (are) \_\_\_\_\_,  
as monitor(s). Upon the request of the monitor(s), my agent(s) must provide the monitor(s) with a copy  
of the power of attorney and a record of all transactions done or made on my behalf. Third parties  
holding records of such transactions shall provide the records to the monitor(s) upon request.

**(j) COMPENSATION OF AGENT(S): (OPTIONAL)**

Your agent is entitled to be reimbursed from your assets for reasonable expenses incurred on your  
behalf. If you ALSO wish your agent(s) to be compensated from your assets for services rendered on  
your behalf, initial the statement below. If you wish to define "reasonable compensation", you may do  
so above, under "Modifications".

( ) My agent(s) shall be entitled to reasonable compensation for services rendered.

**(k) ACCEPTANCE BY THIRD PARTIES:**

I agree to indemnify the third party for any claims that may arise against the third party because of  
reliance on this Power of Attorney. I understand that any termination of this Power of Attorney, whether  
the result of my revocation of the Power of Attorney or otherwise, is not effective as to a third party  
until the third party has actual notice or knowledge of the termination.

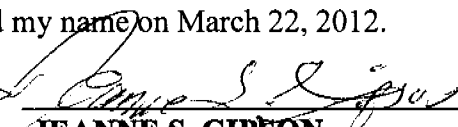
**(l) TERMINATION:**

This Power of Attorney continues until I revoke it or it is terminated by my death or other event  
described in Section 5-1511 of the General Obligations Law. Section 5-1511 of the General Obligations  
Law describes the manner in which you may revoke your Power of Attorney, and the events which  
terminate the Power of Attorney.

**(m) SIGNATURE AND ACKNOWLEDGMENT:**

In Witness Whereof I have hereunto signed my name on March 22, 2012.

PRINCIPAL signs here: ==>

  
\_\_\_\_\_  
**JEANNE S. GIPSON**

STATE OF NEW YORK :  
: SS.:  
COUNTY OF WESTCHESER:

On the 22 day of March in the year 2012 before me, the undersigned, personally appeared **JEANNE S. GIPSON**, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

\_\_\_\_\_  
Notary Public

RONALD F. KILMARTIN, JR.  
NOTARY PUBLIC, State of New York  
No. 4887306  
Qualified in Westchester County  
Commission Expires Feb. 23, 20 15

**(n) IMPORTANT INFORMATION FOR THE AGENT:**

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 on you legal responsibilities that continue until you resign or the Power of Attorney is terminated or revoked. You must:

- (1) act according to any instructions from the principal, or, where there are no instructions, in the principal's best interest;
- (2) avoid conflicts that would impair your ability to act in the principal's best interest;
- (3) keep the principal's property separate and distinct from any assets you own or control, unless otherwise permitted by law;
- (4) keep a record of all receipts, payments, and transactions conducted for the principal; and
- (5) disclose your identity as an agent whenever you act for the principal by writing or printing the principal's name and signing your own name as "agent" in either of the following manners:  
**(Principal's Name) by (Your Signature) as Agent, OR (Your Signature) as Agent for (Principal's Name).**

You may not use the principal's assets to benefit yourself or anyone else or make gifts to yourself or anyone else unless the principal has specifically granted you that authority in this document, which is either a statutory gifts rider attached to a statutory short form power of attorney or a non-statutory power of attorney. If you have that authority, you must act according to any instructions of the principal or, where there are no such instructions, in the principal's best interest. You may resign by giving written notice to the principal and to any co-agent, successor agent, monitor if one has been named in this document, or the principal's guardian if one has been appointed. If there is anything about this document or your responsibilities that you do not understand, you should seek legal advice.

**Liability of agent:**

The meaning of the authority given to you is defined in New York's General Obligations Law, Article 5, Title 15. If it is found that you have violated the law or acted outside the authority granted to you in the Power of Attorney, you may be liable under the law for your violation.

**(c) AGENT'S SIGNATURE AND ACKNOWLEDGMENT OF APPOINTMENT:**

It is not required that the principal and the agent(s) sign at the same time, nor that multiple agents sign at the same time.

I/we, **KELLEY GIPSON**, have read the foregoing Power of Attorney. I am/we are the person(s) identified therein as agent(s) for the principal named therein.

I/we acknowledge my/our legal responsibilities

Agent(s) sign(s) here: ==>

  
**KELLEY GIPSON**

State of New York     )  
County of Westchester) ss.:

On the 22 day of March in the year 2012 before me, the undersigned, personally appeared **KELLEY GIPSON**, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

  
**Signature and Office of individual taking acknowledgment**

RONALD F. KILMARTIN, JR.  
NOTARY PUBLIC, State of New York  
No. 4887306  
Qualified in Westchester County  
Commission Expires Feb. 23, 20 15

**New York Statutory Power of Attorney**  
**Affidavit To Full Force and Effect**

STATE OF NY  
COUNTY OF Westchester

Kelley Gipson, being duly sworn, deposes and says as follows:

1. This affidavit is made in connection with the (transfer)(mortgage) of property known as N/A, in \_\_\_\_\_, New York to \_\_\_\_\_.
2. I am (the)(an) agent named in the Power of Attorney (hereafter "Power of Attorney") made by JEANNE S. Gipson, as principal (the "Principal"), dated 3/22/12.
3. I do not have actual notice that the Power of Attorney has been modified in any way that would affect my ability to authorize or engage in the present transaction for which the Power of Attorney is being used, or notice of any facts indicating that the Power of Attorney has been so modified.
4. I do not have actual notice of the termination or revocation of the Power of Attorney, or notice of any facts indicating that the Power of Attorney has been terminated or revoked, and the Power of Attorney remains in full force and effect.
5. If the Principal has been my spouse, we are not divorced and our marriage has not been annulled.
6. If I am a successor agent, the prior agent is no longer able or willing to serve.

Sworn to before me this 22 day  
of MAR., 20 12

[Signature]  
Notary Public

[Signature]  
RONALD E. KILMARTIN, JR.  
NOTARY PUBLIC, State of New York  
No. 4887306  
Qualified in Westchester County  
Commission Expires Feb. 23, 20 15

NOTE: If multiple agents are appointed, an affidavit is to be executed by each agent.



**POWER OF ATTORNEY  
NEW YORK STATUTORY GIFTS RIDER  
AUTHORIZATION FOR CERTAIN GIFT TRANSACTIONS**

---

**Attached to a New York Statutory Short Form Power of Attorney  
dated March 22, 2012 made by JEANNE S. GIPSON**

**CAUTION TO THE PRINCIPAL:**

This **OPTIONAL** rider allows you to authorize your agent to make gifts in excess of an annual total of \$500.00 for all gifts described in (I) of the Grant of Authority section of the Statutory Short Form Power of Attorney (under Personal and Family Maintenance), or certain other gift transactions during your lifetime. You do not have to execute this rider if you only want your agent to make gifts described in (I) of the Grant of Authority section of the Statutory Short Form Power of Attorney and you initialed "(I)" on that section of that form. Granting any of the following authority to your agent gives your agent the authority to take actions which could significantly reduce your property or change how your property is distributed at your death. "Certain Gift Transactions" are described in section 5-1514 of the General Obligations Law. This Gifts Rider does not require your agent to exercise granted authority, but when he or she exercises this authority, he or she must act according to any instructions you provide, or otherwise in your best interest.

This Gifts Rider and the Power of Attorney it supplements must be read together as a single instrument.

Before signing this document authorizing your agent to make gifts, you should seek legal advice to ensure that your intentions are clearly and properly expressed.

**(a) GRANT OF LIMITED AUTHORITY TO MAKE GIFTS:**

Granting gifting authority to your agent gives your agent the authority to take actions which could significantly reduce your property. If you wish to allow your agent to make gifts to himself or herself, you must separately grant that authority in subdivision (c) below.

To grant your agent the gifting authority provided below, initial the bracket to the left of the authority.

- ( ) I grant authority to my agent to make gifts to my spouse, children and more remote descendants, and parents, not to exceed, for each donee, the annual federal gift tax exclusion amount pursuant to the Internal Revenue Code. For gifts to my children and more remote descendants, and parents, the maximum amount of the gift to each donee shall not exceed twice the gift tax exclusion amount, if my spouse agrees to split gift treatment pursuant to the Internal Revenue Code.

This authority must be exercised pursuant to my instructions, or otherwise for purposes which the agent reasonably deems to be in my best interest.

**(b) MODIFICATIONS:**

Use this section if you wish to authorize gifts in amounts smaller than the gift tax exclusion amount, in amounts in excess of the gift tax exclusion amount, gifts to other beneficiaries, or other gift transactions.

Granting such authority to your agent gives your agent the authority to take actions which could significantly reduce your property and/or change how your property is distributed at your death. If you wish to authorize your agent to make gifts to himself or herself, you must separately grant that authority in subdivision (c) below.

(S) I grant the following authority to my agent to make gifts pursuant to my instructions, or otherwise for purposes which the agent reasonably deems to be in my best interest:

1. To transfer, gift or convey any and all property that I may own as I may do under all circumstances for purposes of gift, estate or tax planning, Medicaid planning or for whatever purposes my agent(s) deems appropriate.
2. To make or change any beneficiary designations, withdrawals, rollovers, transfers, elections and waivers under law regarding all life insurance contracts, annuity contracts, qualified plans, employee benefit plans and individual retirement accounts, whether as plan participant, as beneficiary, IRA owner or a spouse of a participant, including, without limitation, the waiver or qualified joint and survivor annuity and qualified preretirement survivor annuity benefits as provided in I.R.C. § 417; to authorize any distribution, transfer or rollover from all qualified plans and IRAs.
3. To create trusts, whether revocable or irrevocable, on my behalf; to fund such trusts on my behalf or to make transfers and additions to any trusts already in existence; to withdraw income or principal on my behalf from any trust; to exercise whatever trust powers or elections which I may exercise; to open, modify or terminate deposit accounts and any other joint accounts, in my name and the name of other joint tenants, bank accounts in trust form and transfer on death accounts, and to designate or change the beneficiary(ies) of such accounts.
4. To make the following specified transactions:
  - A. open, modify or terminate a deposit account in my name and other joint tenants;
  - B. open, modify or terminate any other joint account in my name and other joint tenants;
  - C. open, modify or terminate a bank account in trust form as described in section 7-5 of the Estates, Powers and Trusts Law, and designate or change the beneficiary or beneficiaries of such account;
  - D. open, modify or terminate a transfer on death account as described in part four of article thirteen of the estates, powers and trusts law, and designate or change the beneficiary or beneficiaries of such account;
  - E. change the beneficiary or beneficiaries of any contract of insurance on my life of the or annuity contract for my benefit;
  - F. procure new, different or additional contracts of insurance on my life principal or annuity contracts for my benefit and designate the beneficiary or beneficiaries of any such contract;

G. designate or change the beneficiary or beneficiaries or any type of retirement benefit or plan;  
and

H. create, amend, fund, revoke or terminate an intervivos trust

I. create, change or terminate other property interests or rights of survivorship, and designate or change the beneficiary or beneficiaries therein;

J. to enter into a "Personal Service Contract" or "Caregiver Agreement" on my behalf with third parties;

K. to Sell or transfer any interest in Real Estate:


L. to Purchase a life estate on my behalf in the home of a third of a party;

M. to purchase and/or enter into an annuity contract that is compliant with DRA, with third parties;

N. to purchase Series I and Series EE United States Savings Bonds because they are not considered an available resource for Medicaid eligibility during this initial holding period; and

**(c) GRANT OF SPECIFIC AUTHORITY FOR AN AGENT TO MAKE GIFTS TO HIMSELF OR HERSELF: (OPTIONAL)**

If you wish to authorize your agent to make gifts or to himself or herself, you must grant that authority in this section, indicating to which agent(s) the authorization is granted, and any limitations and guidelines.

—  I grant specific authority for the following agent(s) to make the following gifts to himself or herself:

1. Transfer, gift or convey any and all property that I may own as I may do under all circumstances for purposes of gift, estate or tax planning, Medicaid planning or for whatever purposes my agent(s) deems appropriate. This grant of authority shall include the ability of my agent(s) to transfer, gift or convey any and all property to himself, herself, or themselves, as the case may be.

2. Make or change all beneficiary designations, withdrawals, rollovers, transfers, elections and waivers under law regarding all life insurance contracts, annuity contracts, qualified plans, employee benefit plans and individual retirement accounts, whether as plan participant, as beneficiary, IRA owner or as spouse of a participant, including, without limitation, the waiver of qualified joint and survivor annuity and qualified preretirement survivor annuity benefits as provided in I.R.C § 417; authorize any distribution, transfer or rollover from all qualified plans and IRAs. This grant of authority shall include the ability of my agent(s) to make or change said beneficiary designations, withdrawals, rollovers, transfers, elections and waivers to name himself, herself, or themselves, as the case may be, as the beneficiary(ies) thereof.

3. Create trusts, whether revocable or irrevocable, on my behalf fund such trusts on my behalf or make transfers and additions to any trusts already in existence; withdraw income or principal on my behalf from any trust; exercise whatever trust powers or elections which I may exercise; open, modify or terminate deposit accounts and any other joint accounts, in my name and the name of other joint tenants, bank accounts in trust form and transfer on death accounts, and designate or change the beneficiary(ies) of such accounts. This grant of authority shall include the ability of my agent(s) to create trusts or accounts naming himself, herself, or themselves, as the case may be, as the beneficiary(ies) or joint tenant(s) of such trusts or accounts.

This authority must be exercised pursuant to my instructions, or otherwise for purposes which the agent reasonably deems to be in my best interest.

**(d) ACCEPTANCE BY THIRD PARTIES:**

I agree to indemnify the third party for any claims that may arise against the third party because of reliance on this Statutory Gifts Rider.

**(e) SIGNATURE AND ACKNOWLEDGMENT:**

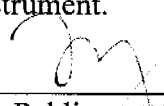
In Witness Whereof I have hereunto signed my name this 22 day of March, 2012.

**(PRINCIPAL SIGNS HERE:) ►**

  
**JEANNE S. GIPSON**

STATE OF NEW YORK :  
: ss.:  
COUNTY OF WESTCHESTER:

On the 22 day of March in the year 2012 before me, the undersigned, personally appeared **JEANNE S. GIPSON**, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

  
Notary Public **RONALD F. KILMARTIN, JR.**  
NOTARY PUBLIC, State of New York  
No. 4887306  
Qualified in Westchester County  
Commission Expires Feb. 23, 20 15

**(f) SIGNATURES OF WITNESSES:**

By signing as a witness, I acknowledge that the principal signed the Statutory Gifts Rider in my presence and the presence of the other witness, or that the principal acknowledged to me that the principal's signature was affixed by him or her or at his or her direction.

I also acknowledge that the principal has stated that this Statutory Gifts Rider reflects his or her wishes and that he or she has signed it voluntarily.

I am not named herein as a permissible recipient of gifts.

WITNESS 1:

Roseanne Mangan  
(Signature of Witness 1)

3/22/12  
(Date)

Roseanne Mangan  
(Printed Name)

51 Belden Rd  
(Address)

Cornell, NY 10512  
(City, State, Zip Code)

WITNESS 2:

Maria Russo  
(Signature of Witness 2)

3/22/12  
(Date)

MARIA RUSSO  
(Printed Name)

506 Wyntonwood Rd  
(Address)

Pelham Manor NY 10803  
(City, State, Zip Code)

(g) This document prepared by: RONALD F. KILMARTIN, JR., ESQ.