## **RECORDING COVER PAGE**

PER ORS 205.234

## **PLEASE FILL OUT** COMPLETE AND LEGIBLE

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2020-006833 Klamath County, Oregon



06/04/2020 11:02:12 AM

Fee: \$102.00

	Stout Law LLC				
	215 Laurel Street, N	Medford, OR	97501		
NOTE: Transaction	TRANSACTION (S), DE as defined by ORS 205.010 orded including, but not lim	"means any action	required or permitted	i by state law or	rule federal law or
Power of	Attorney				
<del>_</del>		<del></del>		<del></del>	
2. Grantor/Direc	ct (s) as described in O	RS 205.160.			
Juanita l	Lucile Gillaspey				
3. <b>Grantee/Indi</b> Debra Le	rect (s) as described in a Wright	ORS 205.160.			
Debra Le	a Wright				
Debra Le		PAID for instrum	, <del>-</del>	racting to conve	ey fee title to any real
Debra Le  4. TRUE AND ACT estate and all memo	a Wright  TUAL CONSIDERATION	PAID for instrum, reference ORS 9	3.030. n/a s shall be sent to th	ne following n	
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Debra Le  4. TRUE AND AC estate and all memo	TUAL CONSIDERATION oranda of such instruments, NGE IS REQUESTED, All veying or contracting to cor	PAID for instrum, reference ORS 9  Tax Statement ovey fee title to an example of the control of	s shall be sent to the y real estate reference n/a	ne following n	

## **DURABLE POWER OF ATTORNEY**

I, Juanita Lucile Gillaspey, residing at 190 S Stage Rd, Medford, Oregon 97501, hereby appoint Debra Lea Wright of 64-744 Punakea Place, Kamuela, Hawaii 96743, as my attorney-in-fact ("Agent") to exercise the powers and discretions described below.

This Power of Attorney shall not be affected by my subsequent incapacity.

My Agent shall have full power and authority to act on my behalf. This power and authority shall authorize my Agent to manage and conduct all of my affairs and to exercise all of my legal rights and powers, including all rights and powers that I may acquire in the future. My Agent's powers shall include, but not be limited to, the power to:

- 1. Open, maintain or close bank accounts (including, but not limited to, checking accounts, savings accounts, and certificates of deposit), brokerage accounts, retirement plan accounts, and other similar accounts with financial institutions.
  - a. Conduct any business with any banking or financial institution with respect to any of my accounts, including, but not limited to, making deposits and withdrawals, negotiating or endorsing any checks or other instruments with respect to any such accounts, obtaining bank statements, passbooks, drafts, money orders, warrants, and certificates or vouchers payable to me by any person, firm, corporation or political entity.
  - b. Perform any act necessary to deposit, negotiate, sell or transfer any note, security, or draft of the United States of America, including U.S. Treasury Securities.
  - c. Have access to any safe deposit box that I might own, including its contents.
- 2. Provide for the support and protection of myself, my spouse, or of any minor child I have a duty to support or have established a pattern of prior support, including, without limitation, provision for food, lodging, housing, medical services, recreation and travel.
- 3. Sell, exchange, buy, invest, or reinvest any assets or property owned by me. Such assets or property may include income producing or non-income producing assets and property.
- 4. Purchase and/or maintain insurance and annuity contracts, including life insurance upon my life or the life of any other appropriate person.
- 5. Take any and all legal steps necessary to collect any amount or debt owed to me, or to settle any claim, whether made against me or asserted on my behalf against any other person or entity.
- 6. Enter into binding contracts on my behalf.

- 7. Exercise all stock rights on my behalf as my proxy, including all rights with respect to stocks, bonds, debentures, commodities, options or other investments.
- 8. Maintain and/or operate any business that I may own.
- 9. Employ professional and business assistance as may be appropriate, including attorneys, accountants, and real estate agents.
- 10. Sell, convey, lease, mortgage, manage, insure, improve, repair, or perform any other act with respect to any of my property (now owned or later acquired) including, but not limited to, real estate and real estate rights (including the right to remove tenants and to recover possession). This includes the right to sell or encumber any homestead that I now own or may own in the future.
- 11. Prepare, sign, and file documents with any governmental body or agency, including, but not limited to, authorization to:
  - a. Prepare, sign and file income and other tax returns with federal, state, local, and other governmental bodies.
  - b. Obtain information or documents from any government or its agencies, and represent me in all tax matters, including the authority to negotiate, compromise, or settle any matter with such government or agency.
  - c. Prepare applications, provide information, and perform any other act reasonably requested by any government or its agencies in connection with governmental benefits (including medical, military and social security benefits), and to appoint anyone, including my Agent, to act as my "Representative Payee" for the purpose of receiving Social Security benefits.
- 12. To create, sign, modify or revoke any trust agreements or other trust documents in an attempt to manage or create a trust that was created for my benefit or the benefit of my dependents, heirs or devisees. This shall include the creation, modification or revocation of any inter vivos, family living, irrevocable or revocable trusts.
- 13. To exercise fiduciary responsibilities that I have a right to delegate.
- 14. Subject to other provisions of this document, my Agent may disclaim any interest, which might otherwise be transferred or distributed to me from any other person, estate, trust, or other entity, as may be appropriate. However, my Agent may not disclaim assets to which I would be entitled, if the result is that the disclaimed assets pass directly or indirectly to my Agent or my Agent's estate.
- 15. Have access to my healthcare and medical records and statements regarding billing,

insurance and payments.

This Power of Attorney shall be construed broadly as a General Power of Attorney. The listing of specific powers is not intended to limit or restrict the general powers granted in this Power of Attorney in any manner.

Any power or authority granted to my Agent under this document shall be limited to the extent necessary to prevent this Power of Attorney from causing, (i) my income to be taxable to my Agent, (ii) my assets to be subject to a general power of appointment by my Agent, or (iii) my Agent to have any incidents of ownership with respect to any life insurance policies that I may own on the life of my Agent.

My Agent shall not be liable for any loss that results from a judgment error that was made in good faith. However, my Agent shall be liable for willful misconduct or the failure to act in good faith while acting under the authority of this Power of Attorney. A Successor Agent shall not be liable for acts of a prior Agent.

No person who relies in good faith on the authority of my Agent under this instrument shall incur any liability to me, my estate or my personal representative. I authorize my Agent to indemnify and hold harmless any third party who accepts and acts under this document.

If any part of any provision of this instrument shall be invalid or unenforceable under applicable law, such part shall be ineffective to the extent of such invalidity only, without in any way affecting the remaining parts of such provision or the remaining provisions of this instrument.

My Agent shall not be entitled to any compensation, during my lifetime or upon my death, for any services provided as my Agent. My Agent shall be entitled to reimbursement of all reasonable expenses incurred as a result of carrying out any provision of this Power of Attorney.

My Agent shall provide an accounting for all funds handled and all acts performed as my Agent as required under state law or upon my request or the request of any authorized personal representative, fiduciary or court of record acting on my behalf.

This Power of Attorney shall become effective immediately, and shall not be affected by my disability or lack of mental competence, except as may be provided otherwise by an applicable state statute. This is a Durable Power of Attorney. This Power of Attorney shall continue effective until my death. This Power of Attorney may be revoked by me at any time by providing written notice to my Agent.

[SIGNATURE PAGE FOLLOWS]

Dated $4-6$ $202C_{at}$	Medford, Oregon.
Juanita Lucile Gillaspey	layey
STATE OF OREGON, COUNTY OF JACKSON, ss:	
This instrument was acknowledged before m	de on this b day of April ,
	Notary Public Notary Public
•	5 29 202 ( My commission expires h

