

FA 4013300-MW

### DURABLE POWER OF ATTORNEY

I, Michael Dale Smith, of Jackson County, Oregon, appoint Nora Ruth Leestma my Agent and attorney-in-fact ("my Agent"), with power and authority to:

1. Support. Make expenditures for my health, education, support, maintenance, and general welfare.
2. Managing and Disposing of Assets. Take possession of, retain, change the form of, manage, maintain, improve, lease, grant options on, encumber, sell, convey, exchange, or otherwise dispose of any of my real or personal property or any interest in property, in any manner and on any terms my Agent considers to be in my best interests. PROVIDED HOWEVER, that no compensation may be paid to my Agent that would require my Agent to be licensed under Oregon Revised Statutes, Chapter 696, or other applicable law pertaining to professional real estate activity. IF MY AGENT SELLS REAL PROPERTY OWNED BY ME, MY AGENT IS AUTHORIZED AND DIRECTED TO RECORD THIS GENERAL DURABLE POWER OF ATTORNEY (OR SUCH PORTIONS THEREOF AS A TITLE COMPANY WILL REQUIRE) WITH THE LEGAL DESCRIPTION OF SUCH PROPERTY TO BE ATTACHED THERETO AS "EXHIBIT A."
3. Checks and Notes. Receive, endorse, sign, sell, discount, deliver, and deposit checks, drafts, notes, and negotiable or nonnegotiable instruments, including any drawn on the Treasury of the United States or the state of Oregon or any other state or governmental entity.
4. Financial Institutions. Enter into any transaction with and contract for any services rendered by a financial institution, including continuing, modifying, or terminating existing accounts; opening new accounts; drawing, endorsing, or depositing checks, drafts, and other negotiable instruments; acquiring and transferring certificates of deposit; withdrawing funds deposited in my name alone or in my name and the name of any other person or persons; and providing or receiving financial statements. "Financial institutions" means banks, trust companies, savings banks, commercial banks, savings and loan associations, credit unions, loan companies, thrift institutions, mutual fund companies, investment advisors, brokerage firms, and other similar institutions.
5. Investments and Securities Transactions. Invest and reinvest in common or preferred stocks, bonds, mutual funds, common trust funds, money market accounts, secured and unsecured obligations, mortgages, and other real or personal property; engage in investment transactions.

6. Insurance and Annuity Contracts. Purchase, maintain, modify, renew, convert, exchange, borrow against, surrender, cancel, and collect or select payment options under any insurance or annuity contract. This power shall extend to any insurance I own on the life of my Agent. Any receipt, release, or other instrument executed by my Agent in connection with any insurance or annuity contract shall be binding and conclusive upon all persons.

7. Business Interests. Continue, participate in, sell, reorganize, or liquidate any business or other enterprise owned by me, either alone or with any other person or persons.

8. Voting. Appear and vote for me in person or by proxy at any corporate or other meeting.

9. Retirement Plans. Establish, modify, contribute to, select payment options under, make elections under, receive payments from, make rollovers to, and take any other steps I might take with respect to IRA accounts and other retirement plans.

10. Credit Cards. Cancel or continue my credit cards and charge accounts, use my credit cards to make purchases, and sign charge slips on my behalf.

11. Collections. Demand and collect any money or property owed to me and give a receipt or discharge for the money or property collected.

12. Debts. Pay my debts and other obligations.

13. Litigation. Sue upon, defend, compromise, or submit to arbitration any controversies in which I may be interested; and act in my name in connection with any complaint, proceeding, or suit. This shall include, but not be limited to, my Agent's authority to sue any third-party to enforce honoring this Durable Power Of Attorney.

14. Borrowing. Borrow in any manner and on any terms my Agent considers to be in my best interests including borrowing from my Agent's own funds, and give security for repayment.

15. Lending. Lend funds to any person, provided that the loan is adequately secured and bears a reasonable rate of interest.

16. Taxes and Assessments. Do the following: pay any tax or assessment; appear for and represent me, in person or by attorney, in all tax matters; execute any power of attorney forms required by the Internal Revenue Service, the Oregon Department of Revenue, or any other taxing authority; receive confidential information from any taxing authority; prepare, sign and file federal, state, and local tax returns and reports for all tax matters, including income, gift, estate, inheritance, generation-skipping, sales, business, FICA, payroll, and property tax matters; execute waivers, including waivers of restrictions on assessment or collection of tax deficiencies and waivers of notice of disallowance of a claim for credit or refund; execute consents, closing agreements, and other documents related to my tax liability; make any elections available under federal or state tax law; and delegate authority or substitute another representative with respect to all matters described in this paragraph.

17. Government Benefits. Perform any act necessary or desirable in order for me to qualify for and receive all types of government benefits, including Medicare, Medicaid, Social Security, veterans', and workers' compensation benefits.

18. Disclaimer. Disclaim any property, interest in property, or power to which I may be entitled; and take all steps required to make the disclaimer effective under state and federal laws, including Section 2518 of the Internal Revenue Code or any successor statute. In deciding whether to disclaim, my Agent shall consider the effect of disclaimer on taxes that may be payable, on qualification for government benefits, and on my existing estate plan.

19. Elective Share Rights. Exercise any right to claim an elective share in any estate or under any Will.

20. Gifting Power. My Agent shall have the power to make any gifts, whether outright or in trust, during my lifetime which are consistent with my most current Will or testamentary provisions of my most current inter vivos trust executed by me or on my behalf. In addition My Agent shall have the authority to make gifts that may be considered self-dealing if those gifts are made for purposes of planning for any needs-based benefits program and are made pursuant to advice from qualified legal counsel.

21. Substitution and Delegation. To appoint and substitute for my said Agent any Agents, nominees or attorneys to exercise any and all of the powers herein and to revoke their authority at pleasure.

22. Fiduciary Positions. Resign from or renounce on my behalf fiduciary positions, including personal representative, trustee, conservator, guardian, attorney-in-fact, and officer or director of a corporation; and discharge me from further responsibility by filing accountings with a court or settling by formal or informal methods.

23. Safe Deposit Box. Have access to and make deposits to or withdrawals from any safe deposit box rented in my name alone or in my name and the name of any other person or persons.

24. Mail. Redirect my mail.

25. Custody of Documents. Take custody of important documents, including any Will, trust agreements, deeds, life insurance policies, and contracts.

26. Digital Assets. My attorney-in-fact shall have (i) the power to access, use and control my digital devices, including but not limited to, desktops, laptops, tablets, peripherals, storage devices, mobile telephones, smartphones, and any similar digital device which currently exists or may exist as technology develops or such comparable items as technology develops for the purpose of accessing, modifying, deleting, controlling or transferring my digital assets, and (ii) the power to access, modify, delete, control and transfer my digital assets, including but not limited to, my emails received, email accounts, digital music, digital photographs, digital videos, software licenses, social network accounts, file sharing accounts, financial accounts, domain registrations, DNS service accounts, web hosting accounts, tax preparation service accounts, online stores, affiliate programs, other online accounts and similar digital items which currently exist or may exist as technology develops or such comparable items as technology develops.

27. Employees and Advisors. Employ, compensate, and discharge attorneys, accountants, investment advisors, property managers, custodians, physicians, dentists, nurses, household help, and others to render services to me or for my benefit.

28. Hospice Care. To pay for hospice care arranged for and authorized by me or my healthcare representative.

29. Nomination of Guardian and Conservator. To the extent permitted by state law, I nominate my Agent to act as my guardian and conservator if I become incapacitated.

30. Perform Other Acts to Carry out the Powers Granted. Execute and deliver any written instrument and perform any other act necessary or desirable to carry out any of the powers granted to my Agent under this power of attorney, as fully as I might do personally. I ratify and confirm all acts performed by my Agent pursuant to this power of attorney.

31. Third Party Reliance. Third parties who rely in good faith on the authority of my Agent under this power of attorney shall not be liable to me, to my estate, or to my heirs, successors, or assigns. Third parties without actual notice of revocation may conclusively rely on the continued validity of this power of attorney. If requested, my Agent shall furnish, and a third party may conclusively rely on, an affidavit or certificate stating that (1) I was competent at the time this power of attorney was executed, (2) the power of attorney has not been revoked, (3) my Agent continues to serve as attorney-in-fact under the power of attorney, and (4) my Agent is acting within the scope of authority granted under the power of attorney. My Agent may sue or pursue other action against any third party who refuses to honor this power of attorney after such an affidavit or certificate has been provided.

32. Durability. The powers granted to my Agent under this power of attorney shall continue to be exercisable even though I have become disabled or incompetent.

33. Consent to Disclosure. My attorney-in-fact, by accepting appointment as such, consents to the disclosure by any lawyer who is engaged to assist him or her in matters relating to this Durable Power Of Attorney, to me and members of my family, or to the court, of any act or omission that might constitute a breach of fiduciary duties, including information obtained through disclosures made to the lawyer by my attorney-in-fact.

34. Disclosure of Medical Records and Information. I hereby give my Agent total authority to obtain, from any provider or source, records and information as to my medical condition, treatment, location, and all other matters relating to my health. I also specifically authorize my Agent to execute any and all documents required under the Health Insurance Portability and Accountability Act (HIPAA) in order to obtain such information.

35. Governing Law. The validity and construction of this power of attorney shall be determined under Oregon law.

I have signed this power of attorney this 16<sup>th</sup> day of May, 2019.

Michael D. Smith  
Michael Dale Smith

STATE OF OREGON       )  
  ) ss.  
County of Jackson       )

On this 16<sup>th</sup> day of May, 2019, before me personally appeared Michael Dale Smith and acknowledged to me that he executed this power of attorney freely and voluntarily.

[Signature]  
Notary Public for Oregon



SIGNATURE OF AGENT

Agent acknowledges that the following is Agent's signature:

Nora Ruth Leestma  
Nora Ruth Leestma

STATE OF OREGON       )  
                                  ) ss.  
County of Jackson       )

Subscribed and sworn to before me this 16<sup>th</sup> day of May, 2019.



Sharon Raab  
Notary Public for Oregon

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