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LISA SMITH, COUNTY RECORDER
MADISON IOWA

Power of Attorney

Preparer Information: (Individual's name, address and phone number)

Gregory L. Kenyon 801 Grand Ave, Des Moines, IA
Suite # 3700 50309-8004
515-246-5829

Taxpayer Information: (Taxpayer's name and full mailing address)

✓ **Return Document To:** (Name and full mailing address)

Ramona M. Burris 641-765-4841
3076 332nd St
Truro, IA 50257

Grantors:

Grantees:

Parcel Identification Number: (If required or applicable)

Legal Description:

Document or instrument number of associated documents previously recorded:

DURABLE POWER OF ATTORNEY (FINANCIAL)

I, **JOHN BURRIS**, of Truro, Iowa, appoint my wife, **RAMONA BURRIS**, as my Attorney-in-Fact. In the event my wife is unable to serve for any reason, I name my daughter **JONNA MITCHELL** as successor to my Attorney-in-Fact. In the event my daughter **JONNA MITCHELL** is unable to serve for any reason, I name my son **SHAWN BURRIS** as successor to my Attorney-in-Fact. In the event my son **SHAWN BURRIS** is unable to serve for any reason, I name my daughter **JACQUELINE BURRIS** as successor to my Attorney-in-Fact.

I revoke any and all powers of attorney that may have been previously executed by me, but specifically excepting any powers of attorney for health care decisions which I may have previously executed.

My Attorney-in-Fact shall have full power and authority to manage and conduct all of my affairs, with full power and authority to exercise or perform any act, power, duty, right or obligation I now have or may hereafter acquire the legal right, power or capacity to exercise or perform. The power and authority of my Attorney-in-Fact shall include, but not be limited to, the power and authority:

1. To buy, acquire, obtain, take or hold possession of any property or property rights and to retain such property, whether income producing or non-income producing;
2. To sell, convey, lease, manage, care for, preserve, protect, insure, improve, control, store, transport, maintain, repair, remodel, rebuild and in every way deal in and with any of my property or property rights, now or hereafter owned by me, and to establish and maintain reserves for improvements, upkeep and obsolescence; to eject or remove tenants or other persons and to recover possession of such property. This includes the right to convey or encumber my homestead;
3. To pay my debts; to borrow money, mortgage and grant security interests in property; to complete, extend, modify or renew any obligations, either secured, unsecured, negotiable or non-negotiable, at a rate of interest and upon terms satisfactory to my Attorney-in-Fact; to lend money, either with or without collateral; to extend or secure credit; and to guarantee and insure the performance and payment of obligations of another person or entity;
4. To open, maintain or close accounts, brokerage accounts, savings and checking accounts; to purchase, renew or cash certificates of deposit; to conduct any business with any banking or lending institution in regard to any of my accounts or certificates of deposit; to write checks, make deposits, make withdrawals and obtain bank statements, passbooks; drafts, money orders, warrants, certificates or vouchers payable to me by any person or entity, including the United States of America and expressly including the right to sell or cash U.S. Treasury Securities and Series E, EE, H and HH Bonds;
5. To have full access to any safety deposit boxes and their contents;

6. To pay all city, county, state or federal taxes and to receive appropriate receipts therefor; to prepare, execute, file and obtain from the government income and other tax returns and other governmental reports, applications, requests and documents; to take any appropriate action to minimize, reduce or establish non-liability for taxes; to sue or take appropriate action for refunds of same; to appear for me before the Internal Revenue Service or any other taxing authority in connection with any matter involving federal, state or local taxes in which I may be a party, giving my Attorney-in-Fact full power to do everything necessary to be done and to receive refund checks; to execute waivers of the statute of limitations and to execute closing agreements on my behalf;

7. To act as proxy, with full power of substitution, at any corporate meeting and to initiate corporate meetings for my benefit as stockholder, in respect to any stocks, stock rights, shares, bonds, debentures or other investments, rights or interests;

8. To invest, re-invest, sell or exchange any assets owned by me and to pay the assessments and charges therefor; to obtain and maintain life insurance upon my life or upon the life of anyone else; to obtain and maintain any other types of insurance policies; to continue any existing plan of insurance or investment;

9. To defend, initiate, prosecute, settle, arbitrate, dismiss or dispose of any lawsuits, administrative hearings, claims, actions, attachments, injunctions, arrests or other proceedings, or otherwise participate in litigation which might affect me;

10. To carry on my business or businesses; to begin new businesses; to retain, utilize or increase the capital of any business; to incorporate or operate as a general partnership, limited partnership or sole proprietorship any of my businesses;

11. To employ professional and business assistants of all kinds, including, but not limited to, attorneys, accountants, realtors, appraisers, salesmen and agents;

12. To apply for benefits and participate in programs offered by any governmental body, administrative agency, person or entity, including creation of a medical assistance income trust ("Miller trust"), if necessary to obtain government eligibility;

13. To disclaim any interest in property passing to me from any person or entity;

14. To make gifts of any of my property or assets to members of my family; and to make gifts to such other persons or religious, educational, scientific, charitable or other nonprofit organizations to whom or to which I have an established pattern of giving, provided however that my attorney in fact may not make gifts to himself or herself.

15. To transfer, assign, convey, and deliver any real or personal property in which I may have or own an interest to the Trustee of any revocable trust created by me, if such trust is in existence at the time, notwithstanding the fact that my Attorney-in-Fact, or his or her spouse, descendants, heirs or assigns, may be the (a) Trustee or successor Trustee of any such trust, (b)

beneficiary of any such trust; or (c) holder of any special or general power of appointment created under such trust. Nothing in this paragraph shall be construed to allow my Attorney-in-Fact to create, amend, restate or revoke any such revocable trust created by me.

This Power of Attorney is to be construed and interpreted as a general power of attorney. The enumeration of specific items, rights, acts or powers shall not limit or restrict the general and all inclusive powers that I have granted to my Attorney-in-Fact. All references to property or property rights herein shall include all real, personal, tangible, intangible or mixed property. Words and phrases set forth in this Power of Attorney shall be construed as in the singular or plural number and as masculine, feminine or neuter gender according to the context.

My Attorney-in-Fact shall not be liable for any loss sustained through an error of judgment made in good faith, but shall be liable for willful misconduct or breach of good faith in the performance of any of the provisions of this power of attorney.

Any authority granted to my Attorney-in-Fact, however, shall be limited so as to prevent this power of attorney (a) from causing my Attorney-in-Fact to be taxed on my income; (b) from causing my estate to be subject to a general power of appointment (as that term is defined by Section 2041 of the Internal Revenue Code of 1986, as amended) by my Attorney-in-Fact; and (c) from causing my Attorney-in-Fact to have any incidents of ownership (within the meaning of Section 2042 of the Internal Revenue Code of 1986, as amended) with regard to any life insurance policies on the life of my Attorney-in-Fact.

The Attorney-in-Fact understands that this power of attorney is given without any express or implied promise of compensation to said Attorney-in-Fact. Any services performed as my Attorney-in-Fact will be done without compensation, either during my lifetime or upon my death, but the Attorney-in-Fact shall be entitled to reimbursement for all reasonable expenses incurred as a result of carrying out any provisions of this power of attorney.


My Attorney-in-Fact may release any dower or other inchoate interest I might have in any real property, including my homestead.

Upon my request or the request of any conservator appointed on my behalf or the personal representative of my estate, my Attorney-in-Fact shall provide a complete accounting as to all acts performed pursuant to this Power of Attorney.

All of my individually identifiable health information and medical records regarding any past, present or future medical or mental health condition, including all information relating to the diagnosis and treatment of HIV/AIDS, sexually transmitted diseases, mental illness, and drug or alcohol abuse relating to my disability or incapacity may be released to the person who is nominated as my Attorney-in-Fact, including any written opinion relating to my disability or incapacity that the person so nominated may have requested. This authorization applies to any information governed by the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"), 42 US 1320d and 45 CAR 160-164, as amended from time to time, and applies even if this Power of Attorney has not become effective. This authorization shall expire upon revocation or upon my death, whichever occurs first.

This Power of Attorney shall become effective immediately, shall not be affected by my disability, and shall continue effective until my death; provided, however, that this Power of Attorney may be revoked by me, while not disabled or incapacitated, as to my attorney in fact at any time by written notice to such attorney in fact. I shall be considered to be disabled or incapacitated when in the opinion of my attending physician I am unable to adequately manage my business and financial affairs.

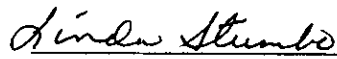
Dated at Ankeny, Iowa, this 29th day of August, 2007.
Polk County



JOHN BURRIS

STATE OF IOWA)
) SS.
COUNTY OF POLK)

On this 29th day of August, 2007, before me, the undersigned, a Notary Public in and for said County and State, personally appeared **JOHN BURRIS**, to me known to be the identical person named in and who executed the within and foregoing instrument, and acknowledged that he executed the same as his voluntary act and deed.



Notary Public in and for said State

