cial Form No. 120	OCIATION ISBA# 32 Jordan, Ol Winterest,	liver & Walters, P.C.	FOR THE LEGAL EFFECT OF THE US THIS FORM, CONSULT YOUR LAY
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rer nation Jerro]	d B. Oliver	P.O. Box 230	Minterset REC46243731
	vidual's Name	Street Address	City MADISON COUNTAIN PARTY
STATA			SPACE ABOVE THIS LINE FOR RECORDER
	GENERAL F	POWER OF ATTO	
100 K.			*** **** **
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1. Designation of	/ Attorney-in-Fact		
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	n Lindberg	, of <u>Winters</u>	set, Iowa,
appoint <u>Linda</u> of Winters			·
	_ 	act is unable to serve for any	reason or if my Attorney in Fact is currently
	e become legally separated or our		
<u>Lee Wenge</u>	r		
of <u>Winters</u>	et, Iowa		, as successor to my Attorney-in-Fact.
) hereby revo	ke any and all general powers of	attorney that may have been	previously executed by me, but specifically
	vers of attorney for health care de		
2. Powers of A	torney-in-Fect.		
A.A. A	enguin Egot aball has a 4-0 accord	a and much state as	ad annudura att att a see att a see att
			nd conduct all of my affairs, with full power
			now have or may hereafter acquire the legal
limited to, the pos		the power and authority of n	ny Attorney-in-Fact shall include, but not be
too to, the pot			
A. To buy, acqui	re, obtain, take or hold possessio	on of any property or property	rights and to retein such property, whether
	or non-income producing;	•	
D Ta""	I====		
			s, control, store, transport, maintain, repair,
			y rights, now or hereafter owned by me, and to eject or remove tenents or other persons
			r encumber my homestead legally described
as follows:	and the second proposity of the t	Sheet has right to contray o	
Lots Th	ree (3) and Four ((4) in Block Twe	enty-one (21) of Pitzer
& Knigh	t's Addition to the	ne City of Winte	rset, Madison County,
Iowa			4 ·
C. To nav my da	bts: to borrow money mortoece	and grant sacurity interests	in property; to complete, extend, modify or
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H. To invest, re-invest, sell or exchange any assets owned by me and to pay the assessments and charges therefore; 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;

f. 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:

C The lowe State Bar Association CALFS Release 3.0 8/94

120 GENERAL POWER OF ATTORNEY Revised November, 1995

- J. 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;
- K. To employ professional and business assistants of all kinds, including, but not limited to, attorneys, accountants, real estate agents, appraisers, salesmen and agents;
- To apply for benefits and participate in programs offered by any governmental body, administrative agency, person or entity;
- M. To transfer to the trustee of any revocable trust created by me, if such trust is in existence at the time, any and all property of mine (excepting property held by me and any other person as joint tenants with full rights of survivorship), which property shall be held in accordance with the terms and provisions of the agreement creating such trust;
- N. To disclaim any interest in property passing to me from person or entity;

3. Construction.

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, tungible, intengible 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 mesculine, feminine or neuter gender according to the context.

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, 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.

4. Liability of Attorney in Fact.

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.

5. Compensation of 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.

6. Accounting by Attorney-in-Fact.

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.

7. Effective Date and Durability.

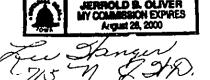
N.B.	DELETE	INAPPROPRIATE	PORTIONS	OF	THE	FOLLOWING	PARAGRAPH.	IF	NO	DELETIONS	ARE	MADE,	THE
PROVISIONS SET FORTH IN PARAGRAPHS B AND C SHALL BE DEEMED TO HAVE BEEN DELETED.													

- A. This Power of Attorney shall be effective immediately, shall not be affected by my disability,
- B. This Power of Attorney shall become effective upon written certification by my physician that I am disabled,

C. This F	ower of Attorney sha	If become effective	, shall not be affected by my
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		l my death; provided, however, that this written notice to such Attorney-in Fact.	Power of Attorney may be revoked by me as to my
Dated		19 <u>97</u> , at <u>Winters</u>	et, Iowa

	AWGA JUT and ROX
STATE OF IOWA, MADISON	Gwendy Iffn Lindberg
STATE OF IOWA, PIADISON	COUNTY, 59:

On this day of) of 19 9	7 before me,	the undersigned, a Notary F	Public in and for the State of
lows, personally appeared GV	wendolyn Lind	aberg	, to me known to be	the identical person named
in and who executed the fore	egoing instrument and	acknowledged	that such person executed	the same as such person's
voluntary act and deed.		1	<u> </u>	



, Notary Public in and for said State.