

E COLLANDE	POWER OF ATTORNEY — PLENARY	
l	Martha May Green residing at Wil	nterset Care Center
Nort	h, Winterset, IA 50273   lowardo hereby appoint Robert	t D. Green
	residing at 604 Walnut, P.O. Box 128, t, my Attorney-in-Fact:	Minburn, Iowa 5016
1. deposit, withdray by any p	To open, maintain or close bank accounts, brokerage accounts, savings and check or to do any business with any banking or lending institution, in regard to any of my actuals, obtain bank statements, passbooks, drafts, money orders, warrants, certificate person, firm, corporation or political entity including the United States of America, a Securities;	ccounts, to make deposits and es or vouchers payable to me
2.	To have full access to any of my safety deposit boxes and their contents wherever lo	cated;
applicati	To prepare, execute and file income and other tax returns, state and federal, and a ions, requests and documents, and to obtain from the governmental or other entity he ch returns or other documents or instruments;	
4.	To invest, reinvest, exchange or sell any assets or property owned by me;	
	To receive and give acquittance for all sums of money, debts or accounts of any king and payable to me;	nd which are or shall become
improve property	To sell, convey (either with or without covenants of warranty), lease, manage, care control, store, transport, maintain, repair, remodel, rebuild and in every way dear rights; to set up any reserves for repairs, improvements, upkeep and obsolescence we tenants or other persons from, and to recover possession of, such property.	al in and with any property or
Thi	s includes the right to sell or encumber my homestead legally described as follows:	
	421 E. COURT - LOT 8 BLK 2 GOES ADDITION TO CITY MADISON COUNTY, IOWA	y OF WINTERSET,
	COMPUTER	FILED NO. 979 ROOK 38 PAGE 560
	Com	1988 HOY -9 PH 2:05
	MADISON COUNTY, 100A  COMPUTER	MARYE WELTY RECORDER MADISON COUNTY TOWN Fee \$10.00
(If t	he Attorney-in-Fact to which this Power of Attorney generally relates is my spous	•
		-Fact solely for the purpose of
property	To transfer to the Trustee of any revocable trust created by me, if such trust is in exist of mine (excepting property held by me and any other person as joint tenants wered property to be held in accordance with the terms and provisions of the agreement	ith right of survivorship), and
every ac	ereby give to each Attorney-in-Fact appointed hereunder full right, power and authori ct, deed and thing necessary or advisable to be done in and about the powers grante could do if personally present and acting.	
All refer by me.	ence to property or property rights herein shall include all real, personal or mixed pro	perty now or hereafter owned
N.B. cro	oss out inappropriate portions of following paragraph	
	wer of Attorney shall be effective immediately, shall not be affected by my disability]: அரீசலியல் முன்ன எழு விக்கிரிர்டி (Philis இசைல் Attorney கிக்கி கணை சரிசல் உட	incompetency,
	ective until my death; provided, however, that this Power may be revoked by me as written notice to such Attorney-in-Fact.	and shall conto any Attorney-in-Fact at any
Dated_	September ,19_88,at Winterset, Iowa	
	Martha May Green	I'men

STATE OF IOWA )
COUNTY OF Madisar ) SS:
On this Orld day of September 19 88 before me, the undersigned, a Notary Public in and for the State of Iowa, personally appeared Martha May Green on me known to be the identical person named in and who executed the foregoing instrument and acknowledged that such erson executed the same as such person's voluntary act and deed.
B. Marline Worrall , Notary Public in and for
the State of Iowa
expressly authorize my Attorney-in-Fact to sell or cash U.S. Treasury Securities, state that my Social Security Number a management of an employee of a financial institution ualified to pay these bonds.
ign in ink in presence f certifying officer
ddress or delivery of check)
(Number and street or rural route) (City or town) (State) (Zip Code)
CERTIFY that the above named person whose identity is well-known or proved to me, personally appeared, before me his 29 to day of 2001, 1988, at (City) (State) nd signed the above request, acknowledging the same to be his free act and deed.
(Signature and title of sertifying officer)
OFFICIAL STAMP OR SEAL)  (Address)

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Market St.