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LISA SMITH, COUNTY RECORDER
MADISON COUNTY IOWA

GENERAL DURABLE POWER OF ATTORNEY

I, Betty L. Rinard, whose address is 1905 W. Pierce #125, Carlsbad, NM 88220, designate the person(s) indicated below, in the order listed, as my Attorney in Fact ("Agent") on the following terms and conditions. If the first person named is unable or unwilling to serve as my Agent, the next person named will be my Agent.

Agent #1: Troy Rinard (son)
24038 WCR 58
Greeley, CO 80631
970/302-3437

Agent #2: Holly J. Underwood (daughter)
6510 Itasca
Lubbock, TX 79416
806/791-2626
806/831-8547

1. **Authority to Act:** This Financial Power of Attorney is immediately effective and my Agent is authorized to act for me until my death. This durable Power of Attorney shall not be affected by my disability and shall continue in effect until my death or revoked by me in writing.
2. **Revocation:** I revoke all prior durable Power of Attorneys executed by me except those regarding healthcare.
3. **Successor Agent:** Any successor Agent has the same powers and rights as my Agent first named above. Any person may rely on any act done by a successor Agent and is not required to find out why any predecessor Agent has stopped acting as my Agent.
4. **Powers of Agent:** I grant to my Agent full power and authority, acting in my best interests and for my welfare, to do everything necessary in exercising the powers granted as fully as I could do if personally present, with full power of substitution or revocation. I hereby ratify and confirm all that my Agent lawfully does pursuant to this Power of Attorney and the powers granted. My Agent may exercise or perform any act, power, duty, right or obligation regarding anything that I now possess or may acquire, relating to any person, matter, transaction or properties (real or personal, tangible or intangible) now owned or later acquired by me.

General Durable Power of Attorney
Betty L. Rinard

Date July 27 - 2000

Initials BR.

My Agent(s) powers include, without limitation, the following:

- a. Retain any of my real, personal, tangible or intangible property and invest in any property, without limit.
- b. My Agent may receive or reinvest any dividends, capital gains and interest which are paid to me.
- c. Borrow money, mortgage, pledge, or grant a security interest in any of my property. My Agent may cancel or continue any of my credit cards, charge cards, ATM cards.
- d. Collect, pay, contest, compromise or abandon claim of or against myself or my property:
- d. I waive any attorney-client privilege, doctor-patient privilege and any other common law or statutory privileges I may have against disclosure of any confidential information to my Agent in the furtherance of the Agent(s) duties.
- f. To open, modify, terminate and close any accounts of whatsoever type I have in my sole name, in the Betty L Rinard Trust or in joint name with any other person(s) in any bank, credit unions, savings and loans, brokerage firm, mutual fund or other financial institution. My Agent may carry on all my ordinary banking and financial business.
- g. To prepare, sign and file on my behalf any and all Federal, State and Local income tax returns, estimated taxes, generation skipping tax and gift tax returns and any related documents and to pay any taxes due.
- h. To have access to any safety deposit box of which I am a tenant with full power to withdraw or change its contents. My Agent may exchange or surrender the box and its keys, renew or cancel the rental contract for it and do all things which any depository institution or its agents may require. I release the lessor from all liability in connection with my Agent's actions.
- i. My Agent may sue or take appropriate legal action against any person, entity, or other third party for damages, including punitive damages, costs, expenses and attorney fees, for refusal to (i) honor this Financial Power of Attorney or (ii) comply with the directions of my Agent pursuant to this instrument.
- j. To apply for or own (on my behalf) any policies of insurance on my life, or for my health care, disability or long-term care or on any of my property, or against any liabilities or damages, as my Agent deems advisable. My Agent may pay any premium for such policies and exercise any incident of ownership over them, including the right to change beneficiaries, cancel the policy, borrow against any cash value, obtain additional coverage, sell the policy, or make any election concerning a policy.
- k. To make application to any government agency for any benefit or government obligation to which I may be entitled. My Agent may endorse any checks or drafts made payable to me from any government agency for my benefit and qualify me for any government entitlement.

General Durable Power of Attorney

Betty L. Rinard

Date 7-23-2010

Initials BR

5. **Counterparts:** Any person may rely fully, completely and equally on: (i) the original of this Power of Attorney, (ii) a signed copy of this Power of Attorney, or (iii) a copy certified by my Agent to be a true copy of the original Power of Attorney. My Agent may create a certified copy of this Power or Attorney by executing a facsimile of the affidavit in Appendix A of this Instrument and attaching it to a copy of this Power of Attorney.

6. **Construction:** This Instrument is to be construed and interpreted as a General Power of Attorney. The enumeration of specific acts, rights, or powers does not limit or restrict, and it is not to be construed or interpreted as limiting or restricting any general powers granted to my Agent.

7. **Governing Law:** The laws of the state(s) of my domicile will govern all questions as to the validity of this Power of Attorney and the construction of its provisions.

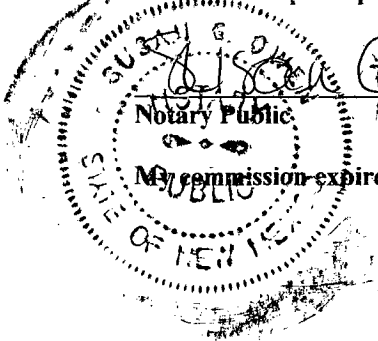
I hereby sign this Financial Power of Attorney on this date of July 23, 2010.

Betty L. Rinard
Betty L. Rinard

State of N. Mexico

County of Eddy

On this date of July 23, 2010, before me appeared Betty L. Rinard, personally known to me (or proved to me on the basis of satisfactory evidence) to be the person named as the principal of this Financial Power of Attorney and acknowledge that she signed it.



Susan G. Owen
Notary Public

My commission expires 10/28/12