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This document was prepared by:

Dale Emerson Frazier

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Coolidge, Arizona 85128'

Return To:

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DURABLE POWER OF ATTORNEY

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Dale Emerson Frazier

I. PRINCIPAL AND ATTORNEY-IN-FACT

I, Dale Emerson Frazier, who reside at 953 W Lindbergh Avenue, Coolidge, Arizona 85128, appoint the following person to serve as my attorney-in-fact, to act for me in any lawful way with respect to the subjects indicated below:

Carol Anne True Coolidge, Arizona

DOC#522074247

If Carol Anne True resigns or is unable or unwilling to serve or continue to serve as my attorney-in-fact, I appoint the following person to serve as my successor attorney-in-fact:

Shayn Nicole Frazier May Albquerque, New Mexico

This power of attorney_will become effective only if I become disabled or incapacitated, as determined by my physician (or a physician chosen by my attorney-in-fact if I do not have a physician or if my physician is unavailable) and set forth in a written certification.

Pursuant to the Health Insurance Portability and Accountability Act of 1996 ("HIPAA") and all other applicable state and federal laws, and exclusively for the purpose of making a determination of my incapacitation or incapability of managing my financial affairs and obtaining an affidavit of such incapacitation by a physician, I authorize any health care provider to disclose to the person named herein as my "attorney-in-fact" any pertinent individually identifiable health information sufficient to determine whether I am mentally or physically capable of managing my financial affairs. In exercising such authority, my attorney-in-fact constitutes my "personal representative" as defined by HIPAA.

III. POWERS OF ATTORNEY-IN-FACT

To the extent permitted by law, my attorney-in-fact may act in my name, place, and stead in any way that I myself could with respect to the following matters:

YOUR ATTORNEY-IN-FACT SHALL BE AUTHORIZED TO ENGAGE ONLY IN THOSE ACTIVITIES THAT ARE INITIALED.



REAL ESTATE TRANSACTIONS:

- Manage, sell, transfer, lease, mortgage, pledge, refinance, insure, maintain, improve, collect and receive rent, sale proceeds, and earnings, pay taxes, assessments, and charges, and perform any and all other acts with respect to real property and interests in real property that I own now or later acquire.
- Defend, settle, and enforce by litigation a claim to real property and interests in real property that I own now or later acquire.
- Buy/lease, or otherwise acquire real property or an interest in real property, including the authority to enter into listing agreements and purchase and sale contracts, and to sign escrow instructions.
- Execute deeds, mortgages, releases, satisfactions, and other instruments relating to real property and interests in real property that I own now or later acquire.
- Hire and discharge accountants, bookkeepers, property managers, and other professionals providing services related to real property and interests in real property that I now own or later acquire.
- Exercise all powers with respect to real property and interests in real property that I could if present and under no disability.



PERSONAL PROPERTY TRANSACTIONS:

- Buy or otherwise acquire ownership or possession of, sell or otherwise dispose of, mortgage, pledge, assign, lease, insure, maintain, improve, pay taxes on, otherwise manage personal property and interests in personal property that I now own or later acquire, and exercise all powers with respect to personal property and interests in personal property that I could if present and under no disability.
- Authority over and the right to access: (1) the content of any of my electronic communications; (2) any catalogue of electronic communications sent or received by me; and (3) any-other digital asset in which I have a right or interest, in accordance with applicable state law.



STOCK AND BOND TRANSACTIONS:

- Buy, sell, pledge, and exchange stocks, mutual funds, bonds, options, commodity futures, and all other types of securities in my name.
- Sign, accept, and deliver in my name certificates, contracts, or other documents relating to the foregoing, including agreements with brokers or agents.
- Exercise voting and other rights and enter into agreements relating thereto.
- Hire and discharge professionals providing services related to the management and investment of any securities in my name.
- Exercise all powers with respect to securities that I could if present and under no disability.



BANKING AND FÍNANCIAL TRANSACTIONS:

Conduct any business with banks, savings and loan associations, credit unions, and other financial institutions, including but not limited to the authority to:

- Sign and endorse all checks and drafts in my name.
- Deposit and withdraw funds from accounts.
- Open, maintain, and close accounts or other banking arrangements.
- Open, continue, and have access to all safe deposit boxes, and add and remove items from them.
- Borrow money, pledge property as security, and negotiate terms of debt payments.
- Apply for and receive letters of credit, credit cards, and traveler's checks, and give an indemnity or other agreement in connection with letters of credit.
- Exercise all powers with respect to financial institution transactions that I could if present and under no disability



BUSINESS OPERATION TRANSACTIONS:

- Buy, sell, expand, reduce, or terminate a business interest, including but not limited to shares in a corporation, membership interests in a limited liability company, and partnership interests in a general, limited, or limited liability partnership.
- Manage and operate any business or business interest that I now have or later acquire, including but not limited to the authority to:
 - Enter into, amend, enforce, and terminate any business contract.
 - Disburse, receive, and demand money in the operation of the business.
 - •/ Merge, reorganize, or sell a business or part of a business.
 - Determine the location, nature, and method of operating the business.
 - Hire and discharge employees and agents.
- If an agent is permitted by law to act-for a principal, and subject to the terms of any partnership or operating agreement, perform any duty and exercise any right, power, or privilege that I have under a partnership or operating agreement, to enforce the terms of a partnership or operating agreement, and to defend, arbitrate, and settle any legal proceeding to which I am a party because of membership in a partnership or limited liability company.
- Exercise a right, power, or privilege that I-have as the holder of a bond, share, or instrument of similar character and to defend, arbitrate, and settle any legal proceeding to which I am a party because of any bond, share, or similar instrument.
- Exercise all powers with respect to business operation transactions that I could if present and under no disability.



INSURANCE AND ANNUITY TRANSACTIONS:

 Obtain, modify, renew, convert, rescind, pay the premium on, or terminate insurance and annuities of all types for myself and for my family and other dependents.

- Designate the beneficiary of the contract, but the attorney-infact may be named a beneficiary of the contract, or an extension, renewal, or substitute for it, only if the attorney-in-fact was named as a beneficiary under a contract procured by the principal before signing this power of attorney.
- Surrender and receive the cash value, borrow against, or pledge any insurance or annuity policy.
- Exercise all powers with respect to insurance and annuity transactions that I could if present and under no disability.

ESTATE AND TRUST TRANSACTIONS:

- To act for me in all matters that affect a trust, probate estate, guardianship, conservatorship, escrow, custodianship, or other fund from which I am now, claim to be, or later become entitled, as a beneficiary, to a share or payment, including but not limited to the authority to sign a qualified disclaimer pursuant to Internal Revenue Code Section 2518 and applicable state law, and petitions, objections, waivers, consents, receipts, settlements, and other agreements relating to the above-referenced matters or proceedings.
- Transfer any of my property to a living trust that I created as a grantor before this power of attorney was signed.
- Exercise all powers with respect to estate and trust transactions that I could if present and under no disability.

LEGAL ACTIONS:

To act for me in all legal matters, whether claims in my favor or against me, including but not limited to the authority to retain and discharge attorneys on my behalf; appear for me in all actions and proceedings, commence actions in my name, sign all documents, submit claims to arbitration or mediation, settle claims, and pay judgments and settlements; and exercise all powers with respect to legal actions that I could if present and under no disability.



PERSONAL AND FAMILY CARE:

To do all acts necessary to maintain my customary standard of living, and that of any individuals legally entitled to be supported by me, including but not limited to the authority to provide and pay for medical care, shelter, clothing, food, usual vacations, education, transportation, and dues for social organizations and to exercise all powers with respect to personal and family care that I could if present and under no disability. My attorney-in-fact is specifically authorized to hire and compensate household, nursing, and other employees necessary for my well-being and that of any individuals legally entitled to be supported by me, and to enter into contracts and commit my resources with respect to the provision of my residential care in a convalescent hospital, skilled nursing home, or alternative residential facility.

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GOVERNMENT BENEFITS:

Claim and collect benefits from the Social Security Administration, including, but not limited to, retirement benefits, supplemental social security, and social security disability benefits and, Medicare, Medicaid, or state, local, and other government programs or civil or military service, and to exercise all powers with respect to government assistance that I could if present and under no disability.

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RETIREMENT PLAN TRANSÁCTIONS:

To act for me in all matters that affect my retirement, deferred compensation, or pension plans, including but not limited to the authority to select payment options, designate beneficiaries, make contributions, exercise investment powers, make "rollovers" of plan benefits, borrow or sell assets from the plan, and, if I am a spouse who is not employed, waive my right to be a beneficiary of a joint or survivor annuity and to exercise all powers with respect to retirement plans that I could if present and under no disability.



GIFTS:

Make gifts from my assets, including debt forgiveness. My attorney-in-fact is permitted to give any of my assets, interests or rights, directly or indirectly, to himself or herself, or to his or her creditors.

DES

PET AND ANIMAL CARE:

To do all acts necessary to maintain the customary standard of living of all pets and animals currently supported by me, including, but not limited to, providing and paying for shelter, food, and veterinary care.



OTHER:

Theodore Joseph Vasquez Jr. of Albuquerque NM will not be allowed any part of my estate or to reside in any place that I own...

My attorney-in-fact is empowered to take all further action, including the payment of expenditures and the preparation and execution of all documents, as my attorney-in-fact deems necessary or appropriate to fully effectuate the purposes of the foregoing matters.

IV. GENERAL PROVISIONS

1) Reliance By Third Parties. I hereby agree that any third party receiving a duly executed copy of this document may rely on and act under it.

Revocation or termination of this power of attorney will be ineffective as to a third party unless and until that third party receives actual notice or knowledge of the revocation or termination. For myself and for my heirs, executors, legal representatives, devisees, and assigns, I hereby agree to indemnify and hold harmless any third party from any and all claims because of good faith reliance on this instrument.

- 2) <u>Severability.</u> If any provision in this power of attorney is found to be invalid or unenforceable, this invalidity or unenforceability will not affect the other provisions of this document, and the other provisions will be given effect without the invalid or unenforceable provision.
- 3) Revocation of Prior Powers of Attorney. I revoke all durable powers of attorney naming me as principal executed prior to this document, specifically excluding any health care powers of attorney and advance health care directives.
- 4) Revocation. I may revoke this power of attorney at any time.
- 5) Maintenance of Records; Accounting. My attorney-in-fact must maintain records of all actions taken on my behalf, including transactions, receipts, disbursements and investment. My attorney-in-fact shall provide an accounting for all funds handled and all acts performed as my attorney-in-fact, but only upon my request, the request of a personal representative or a fiduciary acting on-my behalf, or court order. Any requirement of my attorney-in-fact to file inventories and accounts with the county clerk or with the court is specifically waived.
- 6) <u>Compensation and Reimbursement.</u> My attorney-in-fact is entitled to reasonable compensation for services provided on my behalf pursuant to this power of attorney. My attorney-in-fact will be reimbursed for all reasonable expenses incurred relating to his or her responsibilities under this power of attorney.
- 7) <u>Personal Benefit Permitted.</u> If my attorney-in-fact is acting in good faith, and in my best interests, my attorney-in-fact may personally benefit or profit from transactions taken on my behalf.
- 8) <u>Liability of Attorney-in-Fact.</u> All persons or entities that in good faith endeavor to carry out the provisions of this power of attorney will not be liable to me, my estate, or my heirs for any damages or claims arising because of their actions or inactions based on this power of attorney. My estate will indemnify and hold them harmless. A successor attorney-infact will not be liable for the acts of a prior attorney-in-fact:

9) <u>Authority to Record, Register, or File</u>. My attorney-in-fact may record, register, or file this power of attorney and other necessary and appropriate documents as required to carry out the powers granted herein.

10) <u>Copies.</u> A copy of this durable power of attorney shall be effective as an original for all purposes.

IN WITNESS, WHEREOF, I, Dale Emerson Frazier, the principal, sign my name to this power of attorney this ______ day of ______ all and, being first duly sworn, do declare to the undersigned authority that I sign and execute this instrument as my power of attorney and that I sign it willingly, or willingly direct another to sign for me, that I execute it as my free and voluntary act for the purposes expressed in the power of attorney and that I am eighteen years of age or older, of sound mind and under no constraint or undue influence.

rargous Signature of Dale Emerson Frazier

WITNESS

the witness, sign my name to the foregoing power of attorney being first duly sworn and do declare to the undersigned authority that the principal signs and executes this instrument as the principal's power of attorney and that the principal signs it willingly, or willingly directs another to sign for the principal, and that I, in the presence and hearing of the principal, sign this power of attorney as witness to the principal's signing and that to the best of my knowledge the principal is eighteen years of age or older, of sound mind and under no constraint or undue influence.

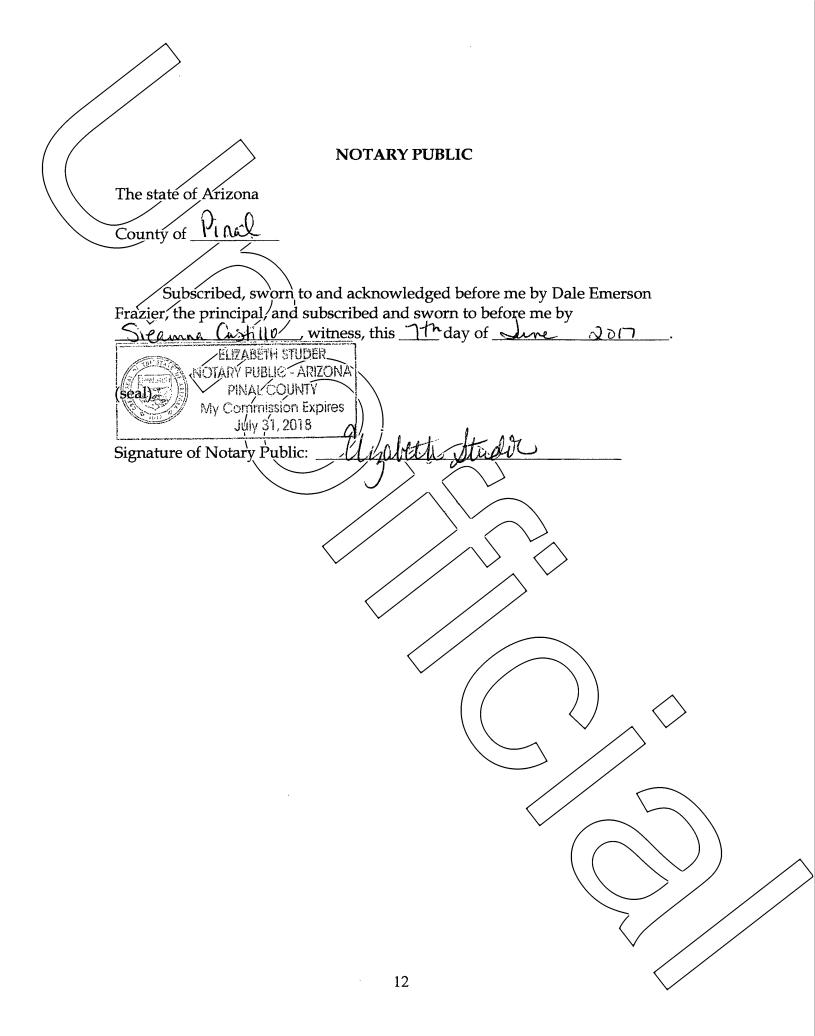
(Signature of witness)

réanna FCastillo

(Print Name)

Portra (Address)

(City, State, ZIP)



REVOCATION OF POWER OF ATTORNEY

I, Dale Emerson Frazier, hereby revoke, cancel and make void all durable
powers of attorney naming me as principal executed prior to
specifically excluding any health care powers of attorney and advance health care
directives. Nothing herein shall affect any action taken by my attorney-in-fact prior to
receiving this notice. This notice shall be conclusive for all purposes, from the date of
execution as set forth below:
This Revocation of Power of Attorney may be served via personal delivery,
mail, facsimile transmission or other electronic transmission, and shall be effective
regardless of the manner in which same is received. A copy of this Revocation of Power
of Attorney shall be effective as an original for all purposes.
I sign my name to this revocation of power of attorney this
June and, being first-duly-sworn, do declare to the undersigned authority that I
sign and execute this instrument as my revocation of power of attorney and that I sign it
willingly, or willingly direct another to sign for me, that I execute it as my free and
voluntary act for the purposes expressed in the power of attorney and that I am
eighteen years of age or older, of sound mind and under no constraint or undue
influence.
Pal Emerson Fragia Date: 6-7-2017
Signature of Dale Emerson Frazier
953 W Lindbergh Avenue Coolidge, Arizona 85128
Coolidge, Arizona 65126

WITNESS

	WIINESS
	I, Steaming FCastille, the witness, sign my name to the
	foregoing revocation of power of attorney being first duly sworn and do declare to the undersigned authority that the principal signs and executes this instrument as the
_	principal's revocation of power of attorney and that the principal signs it willingly, or
	willingly directs another to sign for the principal, and that I, in the presence and hearing
	of the principal, sign this revocation of power of attorney as witness to the principal's
	signing and that to the best of my knowledge the principal is eighteen years of age or
	older, of sound mind and under no constraint or undue influence.
	(Signature of witness) Steam of Castillo (Print Name)
	130 W Central Ave (Address)
	Coolidge AZ 85128
	(Ćity, State, ZII)
	ACKNOWLEDGMENT
	OF NOTÁRY PUBLIC
	The state of Arizona
	County of Pinal
	Subscribed, sworn to and acknowledged before me by Dale Emerson Frazier, the
	principal, and subscribed and sworn to before me by Sieguna Castillo
	witness, this the day of the 2017.
	NOTARY PUBLIC - ARIZONA PINAL COUNTY
	(seal) My Commission Expires
	July 31, 2018
4	Signature of Notary Public: <u>Unabeth Studir</u>
	<i>J</i>