

REVOCATION OF POWER OF ATTORNEY

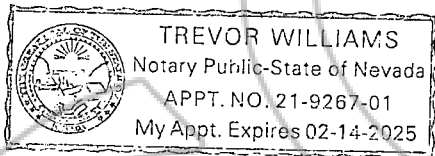
I, David John Barnett, DOB: 10-03-1951 of 5620 Moore Cove AVE, Las Vegas, Nevada 89131, hereby revoke any and all powers of attorney and/or Guardianship of Medical Care under which Kimberly Gayle Livreri was appointed to act on my behalf. I am currently in a Memory Care Center, Elkhorn Jones Memory Care at 6017 West Elkhorn Road Las Vegas, Nevada 89131.

Dated January 28, 2023, at Las Vegas, Nevada.

David John Barnett
David John Barnett

STATE OF NEVADA, COUNTY OF CLARK, ss:

This instrument was acknowledged before me on this 28th day of January, 2023 by David John Barnett.



T. Williams
Notary Public

Trevor Williams (Notary Public)
Title (and Rank)
My commission expires 02/14/2025

Copy delivered to:

Agent: Kimberly Gayle Livreri

Address: 5620 Moore Cove AVE

Las Vegas, Nevada 89131

This document was prepared by:

Name: Krystal Lynn Parish

Address: 4380 S 10th Avenue

Safford, Arizona 85546





Compass Medical, LLC

Compass Medical, LLC
Sharon Ruch, MD PLLC
Gerald Gibbs, NP
Macey Dodd, NP
10620 Southern Highlands Pkwy
Ste 110-155
Las Vegas, NV 89141
PH: 702-754-5421, FX: 775-312-2857

January 11, 2023

RE: David Barnett DOB: 10/3/1951

To Whom It May Concern:

The patient stated above is under our care for visiting primary care services. David Barnett was examined on 1/8/2023 where a Standard Mini Mental Status Exam was completed. The patient scored 20/30 indicating that the patient has borderline impairment between mild to moderate. He has an appointment with the Cleveland Clinic in April for further evaluation.

If you have any questions or concerns, please do not hesitate to let our office know at the number listed above.

Sincerely,

A handwritten signature in black ink that appears to read "Sharon Ruch".

Sharon Ruch, MD