

APN N/A

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LINCOLN COUNTY, NV **2023-163697**
Rec:\$37.00
Total:\$37.00 **01/30/2023 10:55 AM**
DAVID J BARNETT Pgs=5 KC



OFFICIAL RECORD
AMY ELMER, RECORDER

Durable Power of Attorney
Title of Document

Affirmation Statement

DJB I, the undersigned hereby affirm that the attached document, including any exhibits, hereby submitted for recording **does not contain** the social security number, driver's license or identification card number, or any "Personal Information" (as defined by NRS 603A.040) of any person or persons. (Per NRS 239B.030)

_____ I, the undersigned hereby affirm that the attached document, including any exhibits, hereby submitted for recording **does contain** the social security number, driver's license or identification card number, or any "Personal Information" (as defined by NRS 603A.040) of a person or persons as required by law: _____
(State specific law)

David J Barnett Jr. son
Signature Title

David J Barnett Jr.
Print

1-30-23
Date

Grantees address and mail tax statement:
David J Barnett Jr.
P.O. Box 471
Caliente NV 89008

DURABLE POWER OF ATTORNEY

THE UNDERSIGNED, DAVID JOHN BARNETT, DOB:10-03-1951, as Principal, designate the following named person as Attorney-In-Fact to act for the undersigned, with full authority to manage all of my property and to conduct all of my affairs being Medical, Financial and all otherwise necessary.

1. DESIGNATIONS: My Daughter, Krystal Lynn Parish, is designated as my Attorney-In-Fact. She is hereby granted full authority to make final decisions. She will always consult with my other two Children, David John Barnett JR and Kimberly Gayle Livreri, before life altering decisions are finalized.
2. Powers: My Attorney-In-Fact, as fiduciary, shall have all powers of an absolute owner over my assets and liabilities, expressly including the power of sale and conveyance of realty, whether my assets are located within or without the State of Nevada. My Attorney-In-Fact shall not have the power to revoke or change any Will previously executed by me, or revoke or modify any trust, but shall have the authority to change the trustee named in any revocable trust heretofore executed by me, notwithstanding the terms of such trust. My Attorney-In-Fact has the power and authority to:
 - (a) Make do and transact all and every kind of business of every kind and description.
 - (b) Make deposits and payments from any account in a financial institution in the name of the Principal and to enter any safe deposit box to which the Principal has a right of access and deposit or remove property there from.
 - (c) Sell exchange or otherwise transfer title to the Principal's stocks, bonds or other securities.
 - (d) Sell, convey, exchange or otherwise transfer or encumber any real of personal property of the Principal.
 - (e) Disclaim, in whole or in part, any interest in property, whether outright, in trust, or otherwise, so long as in the sole discretion of the Attorney-In-Fact such disclaimer would not be detrimental to the best interests of the Principal and would be in the best interests of those interested in the estate of the Principal and of those who take as a result of any such disclaimer.
 - (f) Submit all Federal and state income tax and gift tax returns on behalf of the Principal and to pay all such taxes as may be due.
 - (g) Represent the Principal during audits, appeals and lawsuits related to any income or gift tax return filed on behalf of the Principal and to pay any assessments for interest or penalties levied against the Principal in connection with such tax returns.
 - (h) Make transfers of the Principal's property, both real and personal, to any trust created by the Principal of which the Principal is the beneficiary during the Principal's life.

- (i) Make transfers of the Principal's property, including, but not limited to, transfers to the Principal's spouse and gifts to the Principal's children, for the purpose of qualifying the Principal for governmental medical assistance to the full extent provided by law should there be a need for medical care or for the purpose of preserving for the Principal's spouse the maximum amount of property allowed under applicable law if an application has been made for governmental medical assistance; any transfer made pursuant to this paragraph shall not be a breach of fiduciary duty by the Attorney-In-Fact.
- (j) Make gifts, whether outright or in trust, to the relatives of the Principal and the spouses of any such relatives, in accordance with any pattern of making gifts to such persons which the Principal has established or planned to establish or in such amounts as the Attorney-In-Fact shall determine appropriate so long as such gifts would be in the best interests of the Principal and those interested in the estate of the Principal, such determinations to be made in the sole discretion of the Attorney-In-Fact.
- (k) Make, amend or revoke any community property agreement, agreement as to the status or property, or other document of similar import entered into by the Principal and his spouse, and make, amend, alter or revoke any of the Principal's life insurance beneficiary designations and retirement plan beneficiary designations so long as in the sole discretion of the Attorney-In-Fact such actions would be in the best interests of the Principal and those interested in the estate of Principal.
- (l) Pay, settle or otherwise discharge any and all claims of liability or indebtedness against the Principal and, in so doing, use any of the Principal's funds or other assets, or use funds or other assets of the Attorney-In-Fact and obtain reimbursement out of the Principal's funds or other assets, and compromise any such claim and make sign, seal and deliver acquittance, releases, or other sufficient discharges in respect of the same.
- (m) Ask, demand, sue for, recover, collect bequests, devises, dividends, annuities, demands, interests in the real and personal property, and in so doing, have, use and take all lawful ways and means in the Principal's name or otherwise for the recovery thereof by attachment, execution, eviction, foreclosure or otherwise, and comprise and agree for and make, sign, and deliver acquittance, releases or other sufficient discharges in respect of the same.
- (n) Sign, seal, execute, deliver and acknowledge all written instruments and do and perform each and every act and all written instruments and do and perform each and every act and thing whatsoever which may be necessary or proper to be done in or about the exercise of the power and authority there in above granted to the Attorney-In-Fact as fully to all intents and purposes as the Principal might or could do if personally present.
- (o) This Power of Attorney is to supersede any prior Power of Attorney given on the 11th day of December 2022, as well as any Assignment of Guardianship given on the 7th day of December 2022, to my daughter Kimberly Gayle Livreri.

3. EFFECTIVENESS: This Durable Power of Attorney shall become irrevocable upon my disability or incompetence, after which my Attorney-In-Fact shall provide for my support, maintenance, health, emergencies or urgent necessities. "Disability" shall include the inability to manage my property and affairs effectively for reasons such as mental illness, mental deficiency, physical illness or disability, advance age, chronic use of drugs, chronic intoxication, confinement, detention by a foreign power, or disappearance. Disability may be evidenced by a written statement of a qualified physician regularly attending to me and/or by other qualified persons with knowledge of any confinement, detention, or disappearance. Incompetence may be established by a finding of a court having jurisdiction over me, based on the standards herein set forth, and not the statutory standards.
4. DURATION: This Durable Power of Attorney shall become effective immediately and shall remain in effect until revoked or terminated pursuant to Paragraph 5 or 6, notwithstanding any uncertainty as to whether I am dead or alive.
5. REVOCAION: While I am competent this Power of Attorney may be revoked or modified by me by written notice to my Attorney-In-Fact.
6. TERMINATION:
 - (i) BY APPOINTMENT OF GUARDIAN: The appointment of a guardian of my estate shall vest in the guardian subject to court approval, the power to revoke, suspend, or terminate this Power of Attorney. The appointment of a guardian of the person only does not empower the guardian to revoke, suspend or terminate this Power of Attorney.
 - (ii) BY DEATH OF PRINCIPAL: My death shall be deemed to revoke this Power of Attorney, but any action taken by my Attorney-In-Fact in good faith prior to actual knowledge of my death shall be binding upon my heirs, devisees and personal representative.
7. ACCOUNTING: My Attorney-In-Fact shall be required to account to any subsequently appointed personal representative or guardian.
8. RELIANCE: My designated and acting Attorney-In-Fact and all persons dealing with the Attorney-In-Fact shall be entitled to rely upon this Power of Attorney so long as neither the Attorney-In-Fact nor any person with whom he or she was dealing at the time of any act taken pursuant to this Power of Attorney, had received actual knowledge or actual notice of any revocation, suspension or terminating of the Power of Attorney by death or otherwise. Any action so taken, unless otherwise invalid or unenforceable, shall be binding upon my heirs, devisees, legatees or personal representatives.

9. **INDEMNITY:** My estate shall hold harmless and indemnify the Attorney-In-Fact from all liability for acts done in good faith and not in fraud of the Principal.

Page #4

10. **APPLICABLE LAW:** The laws of the State of Nevada shall govern this Power of Attorney.

11. **EXECUTION:** This Power of Attorney is signed in duplicate on the 28th day of January 2023, to become effective as provided in Paragraph 3.

Principal Signature: David J. Barnett

State of Nevada)
County of Clark)

This is to certify that on the 28th day of January 2023, before me, the undersigned Notary Public, personally appeared DAVID JOHN BARNETT known to me and known to be the person described in and who executed the foregoing Durable Power of Attorney, and acknowledged to me that he/she signed the same as his/her free and voluntary act and deed, for the uses and purposes therein mentioned.

IN WITNESS WHEREOF, I have hereunto set my and affixed my official seal the month, day and year as the above written/

Trevor Williams
NOTARY PUBLIC in and for said County and State

