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Daneen Schindler, RECORDER/REGISTRAR DELAWARE COUNTY IOWA

POWER OF ATTORNEY

Preparer information: SANDRA TULLOCK 2483 W CAMINO ALTO, SPRINGFIELD, MO 65810

Taxpayer information: Shirley Haigh 913 Sherman Ave., Manchester, IA 52057

Return Document to: SANDRA TULLOCK 2483 W CAMINO ALTO, SPRINGFIELD, MO 65810

Grantors: Grantees:

SHIRLEY HAIGH **SANDRA TULLOCK**

Legal Description is located on page: MA

Document or instrument number of previously recorded documents:

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IOWA STATUTORY POWER OF ATTORNEY

1. POWER OF ATTORNEY

This power of attorney authorizes another person (your agent) to make decisions concerning your property for you (the principal). Your agent will be able to make decisions and act with respect to your property (including but not limited to your money) whether or not you are able to act for yourself. The meaning of authority over subjects listed on this form is explained in the Iowa Uniform Power of Attorney Act, Iowa Code chapter 633B.

This power of attorney does not authorize the agent to make health care decisions for you. You should select someone you trust to serve as your agent. Unless you specify otherwise, generally the agent's authority will continue until you die or revoke the power of attorney or the agent resigns or is unable to act for you.

Your agent is not entitled to compensation unless you state otherwise in the optional Special Instructions.

If your agent is unable or unwilling to act for you, your power of attorney will end unless you have named a successor agent. You may also name a second successor agent.

This power of attorney becomes effective immediately upon signature and acknowledgment unless you state otherwise in the optional Special Instructions.

If you have questions about this power of attorney or the authority you are granting to your agent, you should seek legal advice before signing this form.

DESIGNATION OF AGENT

I, Shirley Haigh, name the following person as my agent:

Name of Agent: Sandra Tullock

Agent's Address: 2483 W. Camino Alto, Springfield, MO 65810

Agent's Telephone Number: (417) 224-3428

DESIGNATION OF SUCCESSOR AGENT

If my agent is unable or unwilling to act for me, I name as my successor agent:

Name of Successor Agent: Darci Caudill

Successor Agent's Address: 715 Wild Pine Ct, Springville, IA 52336

Successor Agent's Telephone Number:

GRANT OF GENERAL AUTHORITY

(Initial each subject you want to include in the agent's general authority. If you wish to

I grant my agent and any successor agent general authority to act for me with respect to the following subjects as defined in the Iowa Uniform Power of Attorney Act, Iowa Code chapter 633B:

grant general authority over all of the subjects you may initial "All Preceding Subjects'
instead of initialing each subject.)
Real Property
Tangible Personal Property
Stocks and Bonds
Commodities and Options
Banks and Other Financial Institutions
Operation of Entity or Business
Insurance and Annuities
Estates, Trusts, and Other Beneficial Interests
Claims and Litigation
Personal and Family Maintenance
Benefits from Governmental Programs or Civil or Military Service
Retirement Plans
Taxes
All Preceding Subjects
LIMITATION ON AGENT'S AUTHORITY

An agent that is not my ancestor, spouse, or descendant shall not use my property to benefit the agent or a person to whom the agent owes an obligation of support unless I have included that authority in the optional Special Instructions.

SPECIAL INSTRUCTIONS

I hereby revoke all general or plenary powers of attorney previously executed, excluding powers of attorney described in Iowa Code section 633B.103, and excluding powers of attorney limited to a specific and identifiable action or transaction, which action or transaction is still capable of performance but has not yet been fully accomplished by the agent.

EFFECTIVE DATE

This power of attorney is effective immediately upon signature and acknowledgment unless I have stated otherwise in the optional Special Instructions.

RELIANCE ON THIS POWER OF ATTORNEY

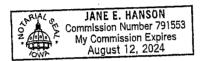
Any person, including my agent, may rely upon the validity of this power of attorney or a copy of it unless that person knows it has terminated or is invalid.

SIGNATURE AND ACKNOWLEDGMENT

Dhiston Harde	June 16, 2023
Your Signature	Date
Shirley Haigh	
Your Name Printed	
913 Sherman Avenue	
Manchester, IA 52057	
Your Address	
(563) 927-6336	
Your Telephone Number	

STATE OF IOWA, COUNTY OF DELAWARE

This document was acknowledged before me on this 16th day of June, 2023, by Shirley Haigh.



Signature of Notary Public

This document prepared by Jane E. Hanson, 401 E Main St, Manchester, Iowa 52057

2. IMPORTANT INFORMATION FOR AGENT

AGENT'S DUTIES

When you accept the authority granted under this power of attorney, a special legal relationship is created between the principal and you. This relationship imposes upon you legal duties that continue until you resign or the power of attorney is terminated or revoked. You must do all of the following:

Do what you know the principal reasonably expects you to do with the principal's property or, if you do not know the principal's expectations, act in the principal's best interest.

Act in good faith.

Do nothing beyond the authority granted in this power of attorney.

Disclose your identity as an agent whenever you act for the principal by writing or printing the name of the principal and signing your own name as agent in the following manner: Shirley Haigh by Sandra Tullock as Agent.

Unless the Special Instructions in this power of attorney state otherwise, you must also do all of the following:

Act loyally for the principal's benefit.

Avoid conflicts that would impair your ability to act in the principal's best interest. Act with care, competence, and diligence.

Keep a record of all receipts, disbursements, and transactions made on behalf of the

principal.

Cooperate with any person that has authority to make health care decisions for the principal to do what you know the principal reasonably expects or, if you do not know the principal's expectations, to act in the principal's best interest.

Attempt to preserve the principal's estate plan if you know the plan and preserving the plan is consistent with the principal's best interest.

TERMINATION OF AGENT'S AUTHORITY

You must stop acting on behalf of the principal if you learn of any event that terminates this power of attorney or your authority under this power of attorney. Events that terminate a power of attorney or your authority to act under a power of attorney include any of the following:

Death of the principal.

The principal's revocation of the power of attorney or your authority.

The occurrence of a termination event stated in the power of attorney.

The purpose of the power of attorney is fully accomplished.

If you are married to the principal, a legal action is filed with a court to end your marriage, or for your legal separation, unless the Special Instructions in this power of attorney state that such an action will not terminate your authority.

LIABILITY OF AGENT

The meaning of the authority granted to you is defined in the Iowa Uniform Power of Attorney Act, Iowa Code chapter 633B. If you violate the Iowa Uniform Power of Attorney Act, Iowa Code chapter 633B, or act outside the authority granted, you may be liable for any damages caused by your violation.

If there is anything about this document or your duties that you do not understand, you should seek legal advice.

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	Operation of Entity or Business
	Insurance and Annuities
	Estates, Trusts, and Other Beneficial Interests
	Claims and Litigation
	Personal and Family Maintenance
	Benefits from Governmental Programs or Civil or Military Service
	Retirement Plans
	Taxes
	All Preceding Subjects
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