

RECEIVED

MAY 27 2004

Department of Water Resources

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE
STATE OF IDAHO, IN AND FOR THE COUNTY OF TWIN FALLS

In Re SRBA

Case No. 39576

SUBCASE NO: 29-2175

STANDARD FORM 5

STIPULATED ELEMENTS OF A
WATER RIGHT

This form is used to report the stipulated elements of one water right acquired under state law. Submission of this form will not automatically result in the issuance of a partial decree. The Presiding Judge or Special Master will conduct any hearing necessary to determine whether the facts, data, expert opinions and law support the issuance of a partial decree for the water right.

The parties agree that the Snake River Basin Adjudication Court has jurisdiction of the parties and subject matter to enter a partial decree for this water right; and they have been served with sufficient process, according to the law; and that they have appeared, prosecuted and defended their positions with regard to this water right dispute.

The parties and IDWR agree and stipulate that the elements of this water right should be described per the attached. The parties and IDWR indicate their concurrence by their signatures below and by initialing each of the attached pages. The powers-of-attorney for the claimant and objectors' signatories are enclosed as Attachments 1 and 2, respectively.

CLAIMANT:

Kenneth Gene Curtis 5-24-04
Gene Curtis
Signatory for Doreen Curtis

OBJECTOR:

David B. Hartvigsen 5/24/04
David B. Hartvigsen
Signatory for Elmer Jay Hartvigsen Family Trust,
Reed & Doris Hartvigsen Family Trust and
Richard N. Hartvigsen

IDWR CONCURRENCE:

Carter Fritschle 5-19-04
Carter Fritschle
Adjudication Supervisor, IDWR

Chris Bromley 5/21/04
Chris Bromley
Attorney for IDWR

IDAHO DEPARTMENT OF WATER RESOURCES RECOMMENDED
WATER RIGHTS ACQUIRED UNDER STATE LAW

RIGHT NUMBER: 29-2175

NAME AND ADDRESS:

DORRIN CURTIS
PO BOX 9
ISLAND PARK ID 83429

SOURCE:

Source:

SPRING

~~ASPEN CREEK~~

~~SPRING~~

Tributary:

ASPEN CREEK

~~MARCH CREEK~~

~~ASPEN CREEK~~

QJ
cf ce
KYL

QUANTITY: 0.50 CFS

PRIORITY DATE: 03/07/1914

POINT OF DIVERSION:

~~T12S R37E S27 SE04 Within BANNOCK County~~

T12S R37E S28 NWSW Within BANNOCK County

~~T12S R37E S28 SE04 Within BANNOCK County~~

PURPOSE AND
PERIOD OF USE:

Purpose of use

Period of use:

Quantity:

IRRIGATION

04/01 10/31

0.50 CFS

PLACE OF USE:

IRRIGATION

within BANNOCK County

T12S R37E S20 SWSE 15.0

T12S R37E S29 NWNE 10.0

25 ACRES TOTAL

OTHER PROVISIONS NECESSARY FOR DEFINITION OR ADMINISTRATION OF THIS WATER RIGHT:

This partial decree is subject to such general provisions necessary for the definition of the rights or for the efficient administration of the water rights as may be ultimately determined by the Court at a point in time no later than the entry of a final unified decree. Section 42-1412(6), Idaho Code.

EXPLANATORY MATERIAL:

BASIS OF CLAIM - License

RIGHT INCLUDES ACCOMPLISHED CHANGE IN PLACE OF USE PURSUANT TO SECTION 42-1425, IDAHO CODE.

CERTIFICATE OF MAILING

I certify that on 25 May, 2004 I mailed the original and copies of this form, including all attachments, to the following persons by mailing the original and/or copies, postage prepaid and addressed as follows: [^]
or faxing

1. Original to:

Clerk of the District Court
Snake River Basin Adjudication
253 Third Avenue North
P. O. Box 2707
Twin Falls, Idaho 83303-2707

Fax: (208) 736-3078

2. Copies to:

Chief, Natural Resources Division
Office of the Attorney General
State of Idaho
P.O. Box 83720
Boise, ID 83720-0098

Fax: (208) 327-5400

IDWR Document Repository
P.O. Box 83720
Boise, ID 83720-0098

D. Scott Crook
Attorney for Elmer Jay Hartvigsen Family Trust,
Reed & Doris Hartvigsen Family Trust &
Richard N. Hartvigsen
David B. Hartvigsen
215 State St., Ste. 650
Salt Lake City, UT 84111

Fax: (801) 413-1620

Doreen Curtis
P.O. Box 9
Island Park, ID 83429

Fax: (435) 863-4057

Gene Curtis
5049 S. 2400 W.
Mt Sterling, UT 84339

Fax: (435) 863-4037

Kenneth Gene Curtis 5/24/04
Signature of person or attorney mailing the form

05/24/2004 12:08 8014131620

SMITH_HARTVIGSEN

PAGE 07

Sent By: WATER RESOURCES;

2083275400;

May-21-04 12:48PM;

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SF5-29-2175

ATTACHMENT 1

DURABLE POWER OF ATTORNEY WITH HEALTH CARE PROVISIONS

I, DOREEN CURTIS, appoint KENNETH GENE CURTIS, of 5049 So. 2400 West, Mt. Sterling, UT 84339, (435) 245-5925, my true and lawful attorney-in-fact, (hereinafter referred to as 'agent') for me and in my name, to do any and all acts which I could do if personally present. This durable power of attorney becomes effective immediately when I sign it.

If KENNETH GENE CURTIS is unable or unwilling to act as agent then CAROL DENISE HORTON, of 4228 Saddlecrest Lane, Westlake Village, CA 91361, (818) 991-6331 shall act with all rights and responsibilities given to the original agent. Bond shall not be required of my agent(s).

My agent may perform for me and in my name and on my behalf any act in the management, supervision, and care of my estate and affairs that I personally have authority to perform. My agent may exercise for me and in my name and on my behalf the powers enumerated below, which are intended to illustrate, and not to limit, the scope of this power. This power of attorney shall apply to all property owned by me, whether title is held as sole owner, as a joint tenant, as a tenant in common, as grantor or trustee of a revocable living trust, or otherwise.

- A. SECURITIES: My agent may buy, sell, pledge, exchange, assign, option, or otherwise transfer any securities of any kind; deal with any broker, banker, or other agent; receive all dividends and interest payments now or hereafter due or payable to me from any security or other indebtedness or investment; vote stock and otherwise represent me at all meetings of shareholders or companies or corporations in which I have an interest; sign proxies or other instruments; tender my resignation as director or officer; subscribe to shares of stock, and execute request for payment of United States Savings Bonds, and surrender paid securities and receive the proceeds thereof.
- B. ACCOUNTS: My agent may open, continue, maintain, change, or close any account, including without limitation any checking or savings account, certificate of deposit, share account, and other like arrangement with any bank, trust company, savings bank, building and loan association, savings and loan association, credit union, or other financial institution; make deposits and withdrawals by check, draft, or otherwise; and endorse checks, notes, and drafts for deposit, collection, or otherwise.
- C. BENEFITS: My agent may apply for and receive any government, insurance and retirement benefits to which I may be entitled. My agent may also exercise any right to elect benefits or payment options or to receive cash value in return for the surrender of any or all rights under any of the following: Life insurance policies or benefits; annuity policies, plans or benefits; mutual fund or other dividend investment plans; and retirement, profit sharing and employee plans and benefits.
- D. DEEDS: My agent may sign, execute, deliver and acknowledge such deeds, deeds of trust, covenants, indentures, agreements, mortgages, pledge agreements, notes, receipts,

Page 2, Durable Power of Attorney of DOREEN CURTIS

checks, bills of exchange, evidence of debts, releases and satisfactions of mortgage debts, judgment debts and other debts.

- E. OTHER PROPERTY, INCLUDING REAL ESTATE: My agent may sell, exchange, option, and convey my real and personal property, wherever located; execute and deliver deeds of general warranty, with the customary covenants for such property; manage and control my real and personal property, wherever located; negotiate, execute, and deliver any leases of my property; demand and collect rents; buy every kind of property, real or personal; arrange for appropriate disposition, use, insurance, and safekeeping of all my property; settle, compromise, and adjust insurance claims; borrow money in my name, and to receive such loans by real estate mortgage or by other collateral. My agent may also purchase medical insurance for any dependent of mine.
- F. TRANSFER OF ASSETS: My agent may transfer from time to time some or all of my assets to the trustee or trustees of any revocable trust that I may have established or may establish in the future, regardless of the extent or limitations on my beneficial interests in that trust, to be administered in accordance with the terms thereof, and may manage the assets of said trust as if they were my solely owned assets.
- G. OPERATION OF BUSINESS: My agent may continue the operation of any business belonging to me or in which I have a substantial interest for such time and in such manner as my agent may deem advisable or to sell or liquidate any business or interest herein, at such time and on such terms as my agent may deem advisable and in my best interests.
- H. COLLECTION AND LITIGATION: My agent may demand and collect all property, real or personal, now or hereafter due, payable, or belonging to me; contest, compromise, settle, or abandon claims in my favor or against me; give receipts, releases, and discharges; commence, pursue, or oppose any action, suit, or legal proceeding relating to any matter in which I am or may hereafter be interested; and compromise, settle, or submit to judgment any such action or proceeding.
- I. TAXES: My agent may represent me before any office of the Internal Revenue Service or the Treasury Department of the United States and before the tax department of any state, county, or municipality with regard to any tax with which I am concerned. In particular without limitation, my agent may represent me in connection with any federal income tax return, Form 1040, for all tax years between 1950 and 2050, inclusive; any federal gift tax returns, Form 709, for all tax years between 1950 and 2050, inclusive; any Idaho income tax return, for all tax years between 1950 and 2050, inclusive; and any Idaho gift tax return, for all tax years between 1950 and 2050, inclusive. My agent may perform all acts that I can perform with respect to any tax matters without limitation. My agent may prepare, sign, and file any tax return; receive originals of all notices and other written communications; negotiate and make compromises; file claims; receive, endorse, and collect checks; receive and examine confidential information; and take appeals, file protests, and execute waivers and closing agreements. My agent may consent on my behalf to have any gift made by my spouse considered as made by each of us under section 2513 of the Internal Revenue Code.

Page 3, Durable Power of Attorney of DOREEN CURTIS

- J. SAFE DEPOSIT BOX: My agent shall have access to any safe deposit box of mine (whether the box is held in my name alone, in my revocable trust, or jointly with another or others) wherever located, and may remove the contents and surrender the box on my behalf. Any institution in which a safe deposit box of mine is located is not liable to me or my heirs or estate for permitting my agent to exercise this power.
- K. POST OFFICE: My agent shall be able to request and authorize the post office to forward my mail to whatever address my agent may deem advisable.
- L. SOCIAL SECURITY: My agent may represent and act for me before the Social Security Administration of the United States, and any similar agency of a state or local government; collect all Social Security benefits due me; and make such arrangements in connection with Social Security benefits including without limitation Medicaid and Medicare as will facilitate their application to my care and support.
- M. EMPLOYMENT OF AGENTS: My agent may employ and dismiss agents, attorneys, investment advisors, accountants, housekeepers, and other persons, and terminate any agency that I may have created at any time.
- N. FIDUCIARY POSITIONS: My agent may renounce any fiduciary positions to which I have been or may be appointed, including, but not limited to personal representative, trustee, guardian, conservator, attorney-in-fact and officer or director of a corporation; to resign such positions in which capacity I am presently serving, and to file an accounting with a court of competent jurisdiction, or settle on a receipt or release or other informal method as my agent deems advisable.
- O. HEALTH CARE AGENT. I hereby further appoint said agent to make health care decisions for me as authorized below. For the purposes of this document, "health care decision" means consent, refusal of consent, or withdrawal of consent to any care, treatment, service, or procedure to maintain, diagnose, or treat an individual's physical condition.
- A. GENERAL STATEMENT OF AUTHORITY GRANTED. Subject to any limitations in this document, I hereby grant to my agent full power and authority to make health care decisions for me to the same extent that I could make such decisions for myself if I had the capacity to do so. In exercising this authority, my agent shall make health care decisions that are consistent with my desires as stated in this document or otherwise made known to my agent, including, but not limited to, my desires concerning obtaining or refusing or withdrawing life-prolonging care, treatment services and procedures.
- B. INSPECTION AND DISCLOSURE OF INFORMATION RELATING TO MY PHYSICAL OR MENTAL HEALTH. Subject to any limitations in this document, my agent has the power and authority to do all of the following:

Page 4, Durable Power of Attorney of DOREEN CURTIS

(1) Request, review, and receive any information, verbal or written, regarding my physical or mental health, including, but not limited to, medical and hospital records.

(2) Execute on my behalf any releases or other documents that may be required in order to obtain this information.

(3) Consent to the disclosure of this information.

(4) Consent to the donation of any of my organs for medical purposes.

C. SIGNING DOCUMENTS, WAIVERS AND RELEASES. Where necessary to implement the health care decisions that my agent is authorized by this document to make, my agent has the power and authority to execute on my behalf all of the following:

(1) Documents titled or purporting to be a "Refusal to Permit Treatment" and "Leaving Hospital Against Medical Advice".

(2) Any necessary waiver or release from liability required by a hospital or physician.

P. NOMINATION OF GUARDIAN: In accordance with Idaho Statutes, as amended from time to time, I nominate my agent to serve as my guardian, conservator, or in any similar capacity to serve without bond or security.

Q. SEVERABILITY: The invalidity of a provision of this power of attorney shall not affect another provision.

R. POWER OF APPOINTMENT: My agent may exercise any power of appointment given to me, whether by will or by trust agreement.

S. GIFTING: **My agent may make gifts to third parties or to the agent(s) as individual(s), as the agent(s), in the sole discretion of the agent(s), deem appropriate, provided said gifts qualify for the annual exclusion under Sections 2503(b), 2503(c) or 2503(e) of the Internal Revenue Code of 1986, including amendments thereto.**

T. COMPENSATION: My agent shall be reimbursed for all reasonable costs and expenses actually incurred and paid under this power of attorney. Otherwise, my agent shall act without compensation.

**THIS POWER OF ATTORNEY SHALL NOT BE AFFECTED BY MY
SUBSEQUENT DISABILITY, INCAPACITY, OR INCOMPETENCY.**

I hereby declare that any act or thing lawfully done hereunder by my said agent(s) shall be binding upon myself, my heirs, legal representatives, personal representatives and assigns.

Page 5, Durable Power of Attorney of DOREEN CURTIS

I hereby revoke any prior durable power of attorney relating to financial matters.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 6th day of December, 2002 at the City of Pocatello, County of Bannock, Idaho.

WITNESSES:

Laurie Black
Julie Martin

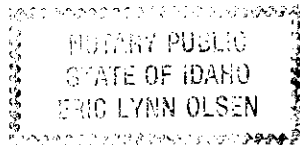
Doreen Curtis
DOREEN CURTIS

STATE OF IDAHO

)
) SS:
)

COUNTY OF BANNOCK

Personally came before me this 6th day of December, 2002, the above named DOREEN CURTIS, to me known to be the person who executed the foregoing instrument and acknowledge the same.



Eric Olsen
Eric L. Olsen, Notary Public
Bannock County, Idaho
My Commission Expires: 12/18/06

05/24/2004 12:08 8014131620
Sent By: WATER RESOURCES;

2083275400;

SMITH_HARTVIGSEN
May-21-04 12:48PM;

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LIMITED POWER OF ATTORNEY

I, **Elmer Jay Hartvigsen**, of Downey, Idaho, individually and as Trustee of the **Elmer Jay Hartvigsen Family Trust ("Trust")**, do hereby appoint **David B. Hartvigsen**, of Centerville, Utah, as my true and lawful Attorney-in-Fact with full authority to act for me and on my behalf and on behalf of the Trust in all matters pertaining to **Subcase No. 29-2175** currently pending in the Snake River Basin Adjudication in the Fifth Judicial District Court, State of Idaho, in and for the County of Twin Falls, and in all matters pertaining to **Water Right No. 29-2175** before the Idaho Division of Water Resources, including, but not limited to, settling all of the Trust's objections pertaining to said water right and subcase.

All persons dealing with my Attorney-in-Fact shall rely on a photostatic copy hereof without requiring the production of the original document and no such persons shall have any duty to inquire into the authority of my Attorney-in-Fact to take any action set forth herein. I hereby release and agree to indemnify any and all persons for actions taken in compliance with directions from my Attorney-in-Fact or for honoring any document executed by my Attorney-in-Fact or for any action taken in reliance thereon.

My Attorney-in-Fact appointed herein may exercise all of the above rights and powers effective the date of this Document and shall remain in full force and effect until the receipt by my Attorney-in-Fact of a written revocation signed by me or until such time as it is terminated by a judicial proceeding in which a guardian or receiver shall be appointed for me. This power of attorney shall in no way be affected or terminated by my incompetency, disability or incapacitation.

This power of attorney shall be governed by the laws of the State of Utah in all respects, including its validity, construction, interpretation, and termination. Should any provisions hereof be held to be invalid, such invalidity shall not affect the other provisions which shall remain in full force and effect.

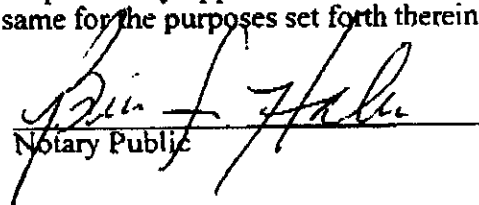
DATED and effective this 18th day of May, 2004.


Elmer Jay Hartvigsen
Individually and as Trustee of the
Elmer Jay Hartvigsen Family Trust

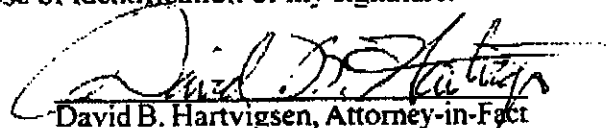
State of Utah }
 : ss.
County of Salt Lake }

On this 18th day of May, 2004, Elmer Jay Hartvigsen personally appeared before me and being duly sworn acknowledged to me that he executed the same for the purposes set forth therein.




Notary Public

I, **David B. Hartvigsen**, the above named Attorney-in-Fact, hereby sign this power of attorney acknowledging my acceptance thereof and for the purpose of identification of my signature.


David B. Hartvigsen, Attorney-in-Fact

LIMITED POWER OF ATTORNEY

I, **Reed Hartvigsen**, of 649 E. Center Street, Bountiful, Utah, Trustee of the **Reed & Doris Hartvigsen Family Trust** (the "Trust") do hereby appoint **David B. Hartvigsen**, of Centerville, Utah, as my true and lawful Attorney-in-Fact with full authority to act for me and on my behalf as a Trustee of said Trust in all matters pertaining to **Subcase Nos. 29-2175, 29-2177, 29-2178, and 29-2187** currently pending in the Snake River Basin Adjudication in the Fifth Judicial District Court, State of Idaho, in and for the County of Twin Falls, and in all matters pertaining to **Water Right Nos. 29-2175, 29-2177, 29-2178, and 29-2187** before the Idaho Division of Water Resources, including, but not limited to, settling all of my objections pertaining to said water rights and subcases.

All persons dealing with my Attorney-in-Fact shall rely on a photostatic copy hereof without requiring the production of the original document and no such persons shall have any duty to inquire into the authority of my Attorney-in-Fact to take any action set forth herein. I hereby release and agree to indemnify any and all persons for actions taken in compliance with directions from my Attorney-in-Fact or for honoring any document executed by my Attorney-in-Fact or for any action taken in reliance thereon.

My Attorney-in-Fact appointed herein may exercise all of the above rights and powers effective the date of this Document and shall remain in full force and effect until the receipt by my Attorney-in-Fact of a written revocation signed by me or until such time as it is terminated by a judicial proceeding in which a guardian or receiver shall be appointed for me. This power of attorney shall in no way be affected or terminated by my incompetency, disability or incapacitation.

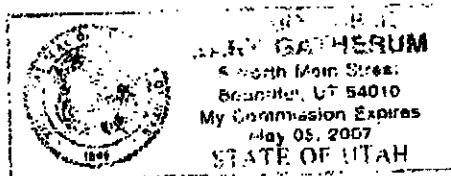
This power of attorney shall be governed by the laws of the State of Utah in all respects, including its validity, construction, interpretation, and termination. Should any provisions hereof be held to be invalid, such invalidity shall not affect the other provisions which shall remain in full force and effect.

DATED and effective this 26 day of April, 2004.

Reed Hartvigsen
Reed Hartvigsen, Trustee
Reed & Doris Hartvigsen Family Trust

State of Utah }
 : ss.
County of Davis }

On this 26 day of April, 2004, Reed Hartvigsen personally appeared before me and being duly sworn acknowledged to me that he executed the same as Trustee for the purposes set forth therein.



Gary Gathers
Notary Public

I, **David B. Hartvigsen**, the above named Attorney-in-Fact, hereby sign this power of attorney acknowledging my acceptance thereof and for the purpose of identification of my signature.

David B. Hartvigsen
David B. Hartvigsen, Attorney-in-Fact

LIMITED POWER OF ATTORNEY

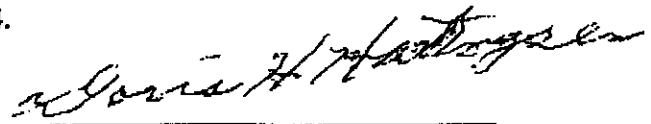
I, **Doris Hartvigsen**, of 649 E. Center Street, Bountiful, Utah, Trustee of the **Reed & Doris Hartvigsen Family Trust** (the "Trust") do hereby appoint **David B. Hartvigsen**, of Centerville, Utah, as my true and lawful Attorney-in-Fact with full authority to act for me and on my behalf as a Trustee of said Trust in all matters pertaining to Subcase Nos. 29-2175, 29-2177, 29-2178, and 29-2187 currently pending in the Snake River Basin Adjudication in the Fifth Judicial District Court, State of Idaho, in and for the County of Twin Falls, and in all matters pertaining to Water Right Nos. 29-2175, 29-2177, 29-2178, and 29-2187 before the Idaho Division of Water Resources, including, but not limited to, settling all of my objections pertaining to said water rights and subcases.

All persons dealing with my Attorney-in-Fact shall rely on a photostatic copy hereof without requiring the production of the original document and no such persons shall have any duty to inquire into the authority of my Attorney-in-Fact to take any action set forth herein. I hereby release and agree to indemnify any and all persons for actions taken in compliance with directions from my Attorney-in-Fact or for honoring any document executed by my Attorney-in-Fact or for any action taken in reliance thereon.

My Attorney-in-Fact appointed herein may exercise all of the above rights and powers effective the date of this Document and shall remain in full force and effect until the receipt by my Attorney-in-Fact of a written revocation signed by me or until such time as it is terminated by a judicial proceeding in which a guardian or receiver shall be appointed for me. This power of attorney shall in no way be affected or terminated by my incompetency, disability or incapacitation.

This power of attorney shall be governed by the laws of the State of Utah in all respects, including its validity, construction, interpretation, and termination. Should any provisions hereof be held to be invalid, such invalidity shall not affect the other provisions which shall remain in full force and effect.

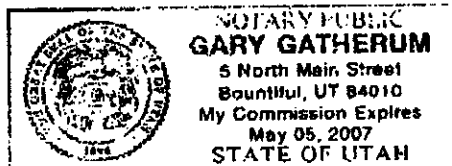
DATED and effective this 26 day of April, 2004.



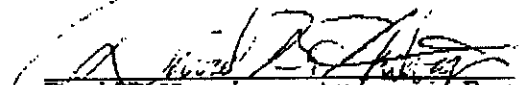
Doris Hartvigsen, Trustee
Reed & Doris Hartvigsen Family Trust

State of Utah }
 : ss.
County of Davis }

On this 26 day of April, 2004, Doris Hartvigsen personally appeared before me and being duly sworn acknowledged to me that he executed the same as Trustee for the purposes set forth therein.


Notary Public

I, David B. Hartvigsen, the above named Attorney-in-Fact, hereby sign this power of attorney acknowledging my acceptance thereof and for the purpose of identification of my signature.


David B. Hartvigsen, Attorney-in-Fact

LIMITED POWER OF ATTORNEY

I, **Richard N. Hartvigsen**, of 1023 E. Millstream Way, Bountiful, Utah, do hereby appoint **David B. Hartvigsen**, of Centerville, Utah, as my true and lawful Attorney-in-Fact with full authority to act for me and on my behalf in all matters pertaining to **Subcase Nos. 29-2175, 29-2177, 29-2178, and 29-2187** currently pending in the Snake River Basin Adjudication in the Fifth Judicial District Court, State of Idaho, in and for the County of Twin Falls, and in all matters pertaining to **Water Right Nos. 29-2175, 29-2177, 29-2178, and 29-2187** before the Idaho Division of Water Resources, including, but not limited to, settling all of my objections pertaining to said water rights and subcases.

All persons dealing with my Attorney-in-Fact shall rely on a photostatic copy hereof without requiring the production of the original document and no such persons shall have any duty to inquire into the authority of my Attorney-in-Fact to take any action set forth herein. I hereby release and agree to indemnify any and all persons for actions taken in compliance with directions from my Attorney-in-Fact or for honoring any document executed by my Attorney-in-Fact or for any action taken in reliance thereon.

My Attorney-in-Fact appointed herein may exercise all of the above rights and powers effective the date of this Document and shall remain in full force and effect until the receipt by my Attorney-in-Fact of a written revocation signed by me or until such time as it is terminated by a judicial proceeding in which a guardian or receiver shall be appointed for me. This power of attorney shall in no way be affected or terminated by my incompetency, disability or incapacitation.

This power of attorney shall be governed by the laws of the State of Utah in all respects, including its validity, construction, interpretation, and termination. Should any provisions hereof be held to be invalid, such invalidity shall not affect the other provisions which shall remain in full force and effect.

DATED and effective this 20 day of April, 2004.

Richard N. Hartvigsen
Richard N. Hartvigsen

State of Utah }
 : ss.
County of Davis }

On this 20 day of April, 2004, Richard N. Hartvigsen personally appeared before me and being duly sworn acknowledged to me that he executed the same for the purposes set forth therein.



Vickie L. Griffin
Notary Public

I, **David B. Hartvigsen**, the above named Attorney-in-Fact, hereby sign this power of attorney acknowledging my acceptance thereof and for the purpose of identification of my signature.

David B. Hartvigsen
David B. Hartvigsen, Attorney-in-Fact