

HONORABLE HENRY JUDSON
Hearing Date: April 20, 2023

**SUPERIOR COURT OF THE STATE OF WASHINGTON
FOR THE COUNTY OF KING**

CHARLES A. HAROLD, JR., on behalf of
Vulnerable Adult SHARON M. HAROLD,

Petitioner,

vs.

DAVID ALLEN PAICE,

Respondent.

Case No. 23-2-03980-7 KNT

**DECLARATION OF AMY JANE SMALL
IN SUPPORT OF PETITIONER'S
REPLY BRIEF**

I, Amy Jane Small, declare as follows:

1. I am the daughter and the attorney-in-fact for the Protected Party Sharon M. Harold. I am also a beneficiary of the Sharon M. Harold Irrevocable Trust dated November 12, 2004 (the "Trust") and a party to the TEDRA proceeding involving the Trust, Case No. 22-4-03826-1 KNT. I have personal knowledge of the facts set forth herein. I make this declaration in support of the Petitioner's Reply Brief.
2. On April 16, 2023, I called USAA Federal Savings Bank at 2:54 p.m.; the call lasted until 3:27 p.m. I spoke to a USAA representative by the name of Ashley. I spoke to her about the signature card on my mother's USAA accounts to explain to me what that document means. Attached hereto as Exhibit A is a true and correct copy of the signature card.
3. Ashley's explanation was the same as the explanation given to me in

1 January of 2023.

2 4. Ashley explained that the top section of the form is for additional add-on
3 of which Power of Attorney for Respondent was checked.

4 5. She also explained each section as follows:

5 a. Section A is typically referred to as "Account Styling." This section
6 describes the way that the account(s) are set up in relationship to ownership of said
7 accounts. In the case of this specific document, Mom's accounts were set up as
8 Sharon OR Dave as Joint Owners of both account numbers noted.

9 b. Section B is referred to as the "Signature Card" for the account(s)
10 noted in section A.

11 c. Section C is the additional or added account holder(s) information.
12 Because Respondent was already a USAA account holder at the time, all of the other
13 requested information such as Social Security number, date of birth and address were
14 not necessary to be filled in because it could all be obtained and confirmed through his
15 existing USAA member number noted on the form in this section.

16 6. Ashley also confirmed to me that under Account Holder Maintenance,
17 through the Account Service Menu for Sharon's accounts, it shows in the notes that
18 Respondent was REMOVED as both a Joint Account Holder and POA on October 27,
19 2022.

20 I declare under penalty of perjury under the laws of the State of Washington
21 that the foregoing is true and correct to the best of my knowledge.

22 Executed this 16th day of April, 2023 at Graegle, California.

23 

24

AMY JANE SMALL

Title	Amy Dec 04-16-2013
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IP: 74.127.112.160



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The document has been completed.

EXHIBIT 1

USAA FEDERAL SAVINGS BANK SIGNATURE CARD AMENDMENT

<input type="checkbox"/> Name Change	<input type="checkbox"/> Add/Change Beneficiary (P.O.D.)	<input type="checkbox"/> Change to Trust/Custodial/TUTMA Account
<input type="checkbox"/> Add Account Holder(s)	<input type="checkbox"/> Change S.S. No./Tax ID Number	<input type="checkbox"/> Remove Beneficiary/Agent/POA
<input checked="" type="checkbox"/> Add Agent or POA	<input type="checkbox"/> Voluntary Removal of Account Holder	

SECTION A

ACCOUNT INFORMATION

Account Styling: **SHARON M HAROLD**
DAVID PAICEAccount #: **0026278022, 0026278014**USAA #: **015806888**S.S.N./Tax ID #: **566-48-8062**DOB: **6/14/1937**Agent/POA Name: **DAVID PAICE - POA**

SECTION B

ALL ACCOUNT HOLDER AUTHORIZED SIGNATURES

The undersigned acknowledges receipt of a copy of the USAA Federal Savings Bank Depository Agreement, and agree to all the terms contained therein. The laws of the State of Texas shall govern all matters pertaining to this Account. Account information may be shared with other USAA affiliates. If this is a joint Account, each Accountholder agrees that they own this Account as joint tenants with rights of survivorship.

FAX AUTHORIZATIONS

If this document is being faxed, the sender sends this document to the recipient by transmission from one fax machine to another. The sender adopts as the sender's original signature appearing as reproduced by the fax machine receiving this transmission. Each of: (1) the paper fed into the sending fax machine and (2) the print out from the receiving machine (including any complete photocopy thereof) is a counterpart original document which is in the possession of the sender.

SUBSTITUTE W-9 FORM

Under Penalty of Perjury, I certify that (1) the number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and (2) I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and (3) I am a U.S. person (including a U.S. resident alien). Note: You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding. I understand that the IRS does not require my consent to any provisions of this document other than the certifications required to avoid backup withholding.

X Sharon M Harold
Authorized Signature SHARON M HAROLD Date
X David Paice
Authorized Signature DAVID PAICE - POA Date 2/2/11
X XXXXXXXXXXXXXXXXXXXX
Authorized Signature Date

S.S.N./Tax ID #: **566-48-8062**

X XXXXXXXXXXXXXXXXXXXX
Authorized Signature Date
X XXXXXXXXXXXXXXXXXXXX
Authorized Signature Date

Note: There is a maximum of five account holders.

SECTION C

ACCOUNT HOLDER/ST INFORMATION

FOR OFFICE USE ONLY
Approval CodeFOR OFFICE USE ONLY
Approval Code

POA

USAA #: **017189460**Name: **DAVID PAICE**

S.S.N./Tax ID #:

DOB:

Address:

Order Card: **None**

USAA #:

Name:

S.S.N./Tax ID #:

DOB:

Address:

Order Card: