


**CERTIFICATE DESIGNATING
AUTHORIZED ISSUER REPRESENTATIVES**

The undersigned, on behalf of the Coulee Medical Foundation, validly existing as a Washington nonprofit corporation formed pursuant to Chapter 24.03 of the Revised Code of the State of Washington (the "Issuer"), under a Trust Indenture, dated as of October 1, 2009 (the "Indenture"), between the Issuer and U.S. Bank National Association (the "Trustee"), relating to the financing of a certain "Project" (as defined in the Indenture) located in Grand Coulee, Grant County, Washington, hereby designates Tom Jensen as Authorized Issuer Representative, and Richard King and Debbie Bigelow as Alternate Authorized Issuer Representative, each of whose signatures appears below and authorizes either of them to take all actions and do all things as Authorized Issuer Representative required or permitted under the terms of the Indenture.

SPECIMEN SIGNATURE: _____


Authorized Issuer Representative

SPECIMEN SIGNATURE: _____

Alternate Authorized Issuer Representative

SPECIMEN SIGNATURE: _____

Alternate Authorized Issuer Representative

Given this 29th day of October, 2009.

COULEE MEDICAL FOUNDATION

By: _____

Name: Tom R. Jensen

Title: President

