

AFTER RECORDING MAIL TO:



199909290193

Kathy Hill, Skagit County Auditor
9/29/1999 Page 1 of 1 3:56:40PM

Name CASCADE BANK

Address 2828 COLBY AVE.

City, State, Zip EVERETT, WA 98201

Filed for Record at Request of:

SPECIAL POWER OF ATTORNEY
(PURCHASE/ENCUMBER)

ISLAND TITLE CO.

SB-152305m ✓

I COLLEEN M JENNINGS, hereby appoint WELLS JENNINGS
as my true and lawful attorney for me and in my name and stead, and for my use and benefit to execute promissory notes, bonds, mortgages, contracts, deeds of trust and any other instrument which may be necessary or proper to purchase and/or encumber the following described real property:

LOT 14, COUNTRY CLUB ADD. NO. 5, ACCORDING TO THE PLAT THEREOF RECORDED
IN VOLUME 11 OF PLATS, PAGES 32 AND 33, RECORDS OF SKAGIT COUNTY,
WASHINGTON.

SITUATED IN SKAGIT COUNTY, WASHINGTON.

Assessor's Property Tax Parcel/Account Number: 4333-000-014-0004

Together with any personal property located thereon.

Giving and granting unto my said attorney in fact full authority and power to do and perform any and all other acts necessary or incident to the performance and execution of the powers herein expressly granted with power to do and perform all acts authorized hereby; as fully to all intents and purposes as the Grantor(s) might or could do if personally present.

This Special Power of Attorney will cease and be of no further effect after the _____ day of _____, _____, or six (6) months from the date hereof, whichever first occurs.

Dated: SEPTEMBER 22, 1999

Colleen M. Jennings
COLLEEN M JENNINGS

WARNING: This power of attorney will result in another person having full right to encumber your real and personal property and obligate you to a debt. It is recommended that you obtain counsel from your attorney prior to execution of this document.

STATE OF FLORIDA)
COUNTY OF SARASOTA)-ss

I certify that I know or have satisfactory evidence that COLLEEN M. JENNINGS

(is/are) the person(s) who appeared before me, and said person(s) acknowledged that (he/she/they) signed this instrument and acknowledged it to be (his/her/their) free and voluntary act for the uses and purposes mentioned in this instrument.

Dated: 9/23/99

Marian R. Oakley
Notary Public in and for the state of FLORIDA

My appointment expires: 5/21/2000



MARIAN R OAKLEY
My Commission CC556281
Expires May. 21, 2000