

AFTER RECORDING MAIL TO:



200205170156
Skagit County Auditor

5/17/2002 Page 1 of 1 3:22PM

Name BRUE R. & SHARLA J. KLEWER

Address 3931 HARBOR PLACE

City, State, Zip ANACORTES, WA 98221

Filed for Record at Request of:

ISLAND TITLE CO.

A21500 ✓

SPECIAL POWER OF ATTORNEY
(PURCHASE/ENCUMBER)

I SHARLA J. KLEWER, hereby appoint BRUCE R. KLEWER
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 54, PLAT OF SEAVIEW DIVISION NO. 4, ACCORDING TO THE PLAT THEREOF, RECORDED IN
VOLUME 17 OF PLATS, PAGE 72, RECORDS OF SKAGIT COUNTY, WASHINGTON; AND
RECORDED JUNE 14, 1999 UNDER AUDITOR'S FILE NO. 9906140008;

SITUATED IN SKAGIT COUNTY, WASHINGTON.

Assessor's Property Tax Parcel/Account Number: 47340000540000

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 30th day of
June, 2002, or six (6) months from the date hereof, whichever first occurs.

Dated: 5/16/02

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.

Sharla J. Klewer
SHARLA J. KLEWER

STATE OF Arizona)
COUNTY OF Pima)-ss

I certify that I know or have satisfactory evidence that Sharla J. Klewer
(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: 5/16/02

Jennifer L. Barnett
Notary Public in and for the state of Arizona
My appointment expires: 4/4/2003

