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Skagit County Auditor

**RETURN ADDRESS:**

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Olympic Northwest Escrow, Inc.  
1480 NW Sid Uhlen Rd.  
Suite 200  
Silverdale, WA 98383

*Please print or type information*

FIRST AMERICAN TITLE CO.

73763

**Document Title(s)** (or transactions contained therein):

1. POWER OF ATTORNEY

**Reference Number(s) of Documents:**

**Grantor(s)** (Last name first, then first name and initials)

1. ACOSTA, JOSE G.

**Grantee(s)** (Last name first, then first name and initials)

1. ACOSTA, MARIPAZ D.

**Legal description** (abbreviated: i.e. lot, block, plat or section, township, range)

Lot 69, "PARTINGTON PLACE DIVISION 3", as per plat recorded in Volume 15 of Plats.  
Pages 56 and 57, records of Skagit County, Washington.

**Assessor's Property Tax Parcel/Account Number**

4591-000-069-0008

The Auditor/Recorder will rely on the information provided on the form. The staff will not read the document to verify the accuracy or completeness of the indexing information provided herein.

## SPECIAL POWER OF ATTORNEY

**PREAMBLE:** This is a **MILITARY POWER OF ATTORNEY** prepared pursuant to Title 10, United States Code, § 1044b, and executed by a person authorized to receive legal assistance from the military services. Federal law exempts this power of attorney from any requirement of form, substance, formality, or recording that is prescribed for powers of attorney by the laws of a state, the District of Columbia, or a territory, commonwealth, or possession of the United States. Federal law specifies that this power of attorney shall be given the same legal effect as a power of attorney prepared and executed in accordance with the laws of the jurisdiction where it is presented.

### KNOW ALL PERSONS BY THESE PRESENTS:

That I, **Jose G. Acosta**, Social Security Number 215-08-3732, currently residing in the state of Washington, by this document do make and appoint **Maripaz D. Acosta**, whose present address is 2945 Lowren Street, Port Orchard, Washington 98366, as my true and lawful attorney to do and execute (or to act with persons jointly interested with myself therein in the doing or execution of) any or all of the following acts or things:

To make, indorse, accept, receive, sign, seal, execute, acknowledge, and deliver any documents, instruments, or paper necessary or convenient to obtain/refinance a mortgage through Olympic Northwest Mortgage Escrow & Insurance to our property in my name and for my real property in the City of Mount Vernon, County of Skagit, State of Washington, located at 824 South 28<sup>th</sup> Street, Mount Vernon, Washington 98243, and to enter into for such price and at such rate of interest and upon such terms as to shall seem best; and further, to record this Power of Attorney in the clerk's office of the county of Kitsap, state of Washington prior to engaging in any of the above-authorized transactions.

I **HEREBY GIVE AND GRANT** TO my said attorney full power and authority to perform every act and thing whatsoever that is necessary or appropriate to accomplish the purposes for which this Power of Attorney is granted, as fully and effectually as I could do if I were present; and I hereby ratify all that my said attorney shall lawfully do or cause to be done by virtue of this document.

**PROVIDED**, however, that all business transacted hereunder for me or for my account shall be transacted in my name, and that all endorsements and instruments executed by my said attorney for the purpose of carrying out the foregoing powers shall contain my name, followed by that of my said attorney and the designation "attorney-in-fact."

I **FURTHER DECLARE** that any act or thing lawfully done hereunder by my said attorney shall be binding on myself and my heirs, legal and personal representatives and assigns, whether the same shall



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have been done either before or after my death, or other revocation of this instrument, unless and until reliable intelligence or notice thereof shall have been received by my said attorney.

**FURTHER**, this power of attorney shall remain in full force and effect until **05 October 2003**, unless sooner revoked by me, provided, however, that such prior revocation shall be of no effect in respect to parties acting or things done in reliance hereon prior to receipt by them of such notice of revocation as may be prescribed by law.

**IN WITNESS WHEREOF**, I have hereunto set my hand and seal on this day, 05 April 2003.

  
\_\_\_\_\_  
**JOSE G. ACOSTA**

GRANTOR

**ACKNOWLEDGEMENT**

**SERVING WITH THE ARMED FORCES OF THE UNITED STATES  
ON BOARD USS RAINIER (AOE 7) LOCATED AT SEA**

Before me personally appeared **Jose G. Acosta**, who, having produced a Uniformed Services Identification Card, is known to me to be the identical person who is described herein, and who signed and executed the foregoing instrument on this day, April 05, 2003, as a true, free, and voluntary act and deed, for uses, purposes, and considerations therein set forth. And I do further certify that I am a Commissioned Officer of the Armed Forces of the United States serving in the rank indicated below, that by Federal law I am authorized to exercise the powers of a notary without requirement of a seal, and that this document is executed by me in accordance with those powers and in that capacity.

  
\_\_\_\_\_  
LTJG Patricia A. McGuire, U.S. Naval Reserve

Authority: 10 U.S.C. §1044a.

NO SEAL REQUIRED



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