

WHEN RECORDED RETURN TO:



200404160110

Skagit County Auditor

4/16/2004 Page 1 of 3 11:57AM

# Chicago Title Insurance Company

425 Commercial Street, Mount Vernon, Washington 98273

DOCUMENT TITLE(s)

- 1. SPECIAL DURABLE POWER OF ATTORNEY
- 2.
- 3.

REFERENCE NUMBER(s) OF DOCUMENTS ASSIGNED OR RELEASED:

Additional numbers on page \_\_\_\_\_ of the document

GRANTOR(s):

- 1. DIANE L SHOEMAKER
- 2.
- 3.

Additional names on page \_\_\_\_\_ of the document

GRANTEE(s):

- 1. GREGORY E. PARR
- 2.
- 3.

Additional names on page \_\_\_\_\_ of the document

ABBREVIATED LEGAL DESCRIPTION:

N/A

*Lt 198 shelter bay*

Complete legal description is on page \_\_\_\_\_ of the document

ASSESSOR'S PROPERTY TAX PARCEL ACCOUNT NUMBER(s):

N/A

*P 84195*

(sign only if applicable) I am requesting an emergency nonstandard recording for an additional fee as provided in RCW 36.18.010. I understand that the recording processing requirements may cover up or otherwise obscure some part of the text of the original document.

Signature \_\_\_\_\_

This cover sheet is for the County Recorder's indexing purposes only. The Recorder will rely on the information provided on the form and will not read the document to verify the accuracy or completeness of the indexing information provided herein.

## SPECIAL DURABLE POWER OF ATTORNEY

**Know all men by these:** That I, **Diane L. Shoemaker**, a legal resident of Oregon State, have made, constituted and appointed, and by these presents, do make, constitute and appoint, **Gregory E. Parr** my true and lawful Attorney-in-fact to act as follows, **Giving and Granting** unto my said Attorney-in-fact full power to:

Do any and all acts in my name and in my stead regarding any dealings with the closing of the escrow at Chicago Title Company Escrow No. IMV0078NC Order No. IC30255 for Tax Parcel #P84195 5100-002-198-0000. Shelter Bay Lot 198.

**Further**, I do assign to my aforesaid Attorney-in-fact the power and authority to manage and control, the above in such manner as the Attorney-in-fact may deem advisable, and shall have, enjoy and exercise all powers and rights over and concerning said dealings as fully and amply as though said Attorney-in-fact was the absolute and unqualified owner of same, including the power to grant, bargain, encumber and hypothecate, except to the extent that such management would cause inلودability of any assets in my name or in the name of my estate.

**Further**, I do authorize my aforesaid Attorney-in-fact to perform all necessary acts in the execution of the aforesaid authorizations with the same validity as I could effect if personally present. Any act or thing lawfully done hereunder by my said attorney-in-fact shall be binding on myself and my heirs, legal and personal representatives and assigns.

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

I **further declare** this power shall remain in effect even though I am reported or listed or otherwise, as "missing", it being my intention that the designation of such status shall not bar my said attorney-in-fact from fully and completely exercising and continuing to exercise any and all powers and rights herein granted until this Special Durable Power of Attorney is revoked by my death or as otherwise provided herein.



In Witness Whereof, I have hereto set my hand this 13 day of April, 2004.

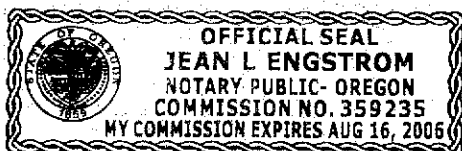
  
Diane L. Shoemaker

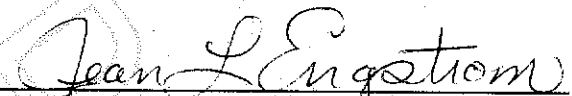
STATE OF OREGON

COUNTY OF

On April 13, 2004 before me, the undersigned, a Notary Public in and for said State, personally appeared Diane L. Shoemaker, known to me or proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to the within instrument and acknowledged that she executed the same.

Witness my hand and official seal.



  
NOTARY PUBLIC in and for the State of Washington, residing at: Bend OREGON  
Aug 16, 2006 Deschutes  
My Commission Expires:

