

AFTER RECORDING MAIL TO:  
First American Title Of Skagit County  
3202 Commercial Avenue  
Anacortes, WA 98221



200509090118  
Skagit County Auditor

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Filed for Record at Request of  
First American Title Of Skagit County  
Escrow Number: A85224

**SPECIAL POWER OF ATTORNEY  
(PURCHASE/ENCUMBER)**

Grantor(s): Edward A. Jensen  
Grantee(s): Claudia D. Jensen

FIRST AMERICAN TITLE CO.  
A85224-2

Lot 2, "WINDWARD VILLAGE"  
Additional legal(s) on page: 2  
Assessor's Tax Parcel Number(s): 4837-000-002-0000, P121659

I, Edward A. Jensen  
hereby appoint Claudia D. Jensen  
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 instruments which may be necessary or proper to purchase and/or encumber the following described real property:

Lot 2, "PLAT OF WINDWARD VILLAGE" as per plat recorded June 14, 2004 under Auditor's File No. 200406140129, records of Skagit County, Washington.

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 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

Dated: August 18, 2005

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

Edward A. Jensen

City of TORONTO  
Prov. of ONTARIO, CANADA } SS:

I certify that I know or have satisfactory evidence that Edward A. Jensen, the person(s) who appeared before me, and said person(s) acknowledged that he/she/they signed this instrument and acknowledge it to be his/her/their free and voluntary act for the uses and purposes mentioned in this instrument.

Date: AUG 18/05

Notary Public in and for the State of  
Residing at TORONTO ONTARIO CANADA  
My appointment expires: PERMANENT

