

200603310155 Skagit County Auditor			
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Name Mr and Mrs Jeffrey A. Bucklin	3/31/2006 Page 1 of 311:24AM
Address 1203 Oak Place	
City/State Mount Vernon, WA. 98273	
Document Title(s): (or transactions contained therein)	First American Title
1. Special Power of Attorney 2.	Insurance Company
3. 4.	FIRST AMERICAN TITLE CO. B87354E-1
Reference Number(s) of Documents assigned or relea	sed:
☐ Additional numbers on page of docume	(this space for title company use only)
☐ Additional numbers on page of docume	
Grantor(s): (Last name first, then first name and initials) 1. Jeffrey Alan Bucklin 2. 3. 4. 5. Additional names on page of document	
 Grantee(s): (Last name first, then first name and initials) Cealleigh M. Bucklin 	
 3. 4. 5. Additional names on page of documen 	t S
Abbreviated Legal Description as follows: (i.e. lot/block	t/plat or section/township/range/quarter/quarter)
Lot 23, "THE MEADOWS - PHASE II, A PLANNED to the plat thereof recorded in Volume 16 inclusive, records of Skagit County, Wash	of Plats, pages 1 through 7,

☐ Complete legal description is on page _____ of document

Assessor's Property Tax Parcel / Account Number(s):

P106488

NOTE: The auditor/recorder will rely on the information 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

(Purchase Real Estate and Acquire Mortgage)

PREAMBLE: This is a MILITARY POWER OF ATTORNEY prepared and executed pursuant to Title 10, United States Code, section 1044b, by a person authorized to receive legal assistance from the military services. Federal law exempts a MILITARY POWER OF ATTORNEY from any requirement of form, substance, formality, or recording that is prescribed for powers of attorney by the laws of any state, commonwealth, territory, district, or possession of the United States. Federal law specifies that a MILITARY 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 MEN BY THESE PRESENTS:

That I, JEFFREY ALL BUCKLIA , have made, constituted and appointed, and by this act and these presents, do make, constitute and appoint CFAURIGH M. BUCKLIA whose address is 4814 JONES COUNT HONOLULY, FIL 96818 , as my true and lawful attorney(s) with full power to act in my stead and in my behalf to make, do and transact all of the following business whatsoever in my name as fully as though I myself were acting; said power to include full power and authority to do or perform for me, in my name, place and stead, the following, to wit:

GIVING AND GRANTING unto my said attorney(s) full power and authority to do and perform all and every act, deed, and thing whatsoever that is necessary in the execution of this power of attorney as fully as I might or could do if present and acting. I hereby ratify and confirm whatsoever my attorney(s) shall do in the premises by virtue of this authority. This power shall remain in full force and effect until 1044 2066 unless sooner revoked.

And I hereby declare that in the absence of such a written, recorded revocation, any act or thing lawfully done hereunder by my said attorney(s) shall be binding on myself, my heirs, legal and personal representatives, and assigns, whether the same shall have been done before or after my death, unless and until reliable intelligence or notice thereof shall have been received by my said attorney(s); and whether or not I, the grantor of this instrument, shall have been reported or listed, either officially or otherwise, as "missing in action" or as a "prisoner of war" as those phrases are used in Naval parlance, it being the intendment that such status designation shall not bar my



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used in Naval parlance, it being the intendment that such status designation shall not bar my attorney(s) from fully and completely exercising and continuing to exercise any and all powers and rights herein granted, and that such report of missing-in-action or prisoner-of-war status shall neither constitute nor be interpreted as constituting notice of my death nor operate to revoke this instrument.

This Power of Attorney shall not be affected by my subsequent disability or incapacity, and it is my intention that this Power of Attorney be governed by the Uniform Durable Power of Attorney Act, HAWAII REVISED STATUTES Chapter 551D.

IN WITNESS WHEREOF, I have hereunto set my	hand and soal this 26	day of
NO 3 65	rana ana seat mis	
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The same of the sa	BATT 6	A DELLAR
	Whom	
	GRANTOR	91/22/19
		Same of the
		THAN DE
SERVING WITH THE ARMED FORCES OF		
SERVICE OFFICE PACIFIC, DETACHMEN	NT PEARL HARBOR, PEA	ARL HARBOR,
HAWAII		
Before me personally appearedJEFF	REY A RUCKIN	who having
produced a Uniformed Services Identification Ca		
who is described herein, and who signed and execu		
	free, and voluntary act and	
purposes, and considerations therein set forth. A		
Petty Officer of the Armed Forces of the United S		
by Federal law I am authorized to exercise the por		
and that this document is executed by me in accord		
7/	<u></u>	
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Kuthority: 10 U.S.C. §1044a. NO SEAL REQUIRED

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