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land Title
Document Title:
Reference Number:
Grantor(s): [] additional grantor names on page
1. Randall Warren Siefferman
2.
Grantee(s): [] additional grantee names on page
1. Lori Lee Forsman Siefferman
<b>2.</b>
Abbreviated legal description: [] full legal on page(s)
Abbreviated legal description: [] full legal on page(s) Lot 16 117, Block 7, Kellogg to Ford's Addition
Assessor Parcel / Tax ID Number: [] additional tax parcel number(s) on page
P57721
I <u>Lockken</u> , am hereby requesting an emergency non-
standard recording for an additional fee 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. Recording fee is \$32.00 for the first page, \$1.00 per page
thereafter per document. In addition to the standard fee, an emergency recording fee of
\$50.00 is assessed. This statement is to become part of the recorded document.
Signed Jim Akken Dated 4/27/06

## LIMITED POWER OF ATTORNEY FOR SALE OF REAL ESTATE

## KNOW ALL PERSONS BY THESE PRESENTS:

I, Randall Warren Siefferman ("Principal") maintaining an address at 2316 31<sup>st</sup> Anacortes Wa.98221 do hereby make and appoint Lori Lee Forsman Siefferman ("Agent") maintaining an address at: 2316 31<sup>st</sup> Anacortes, Wa. 98221 my true and lawful attorney-in-fact for me and in my name, and in my behalf with full power to:

	on such terms as my Agent shall deem appropriate, my interest in the real estate
	31st Anacortes Wa 98221 (Address of property) and legally described as
Kellogg's & Ford	TO ANA LTS 16&17&E1/2 18 BLK 7 AKA LT 6 BL K7 OF SUR AF #877715

This limited power of attorney shall include the right to complete and execute any and all documents, instruments, warranties, releases or deeds necessary for such transaction and to do all other things required to complete such transaction, including retaining lawyers, accountants, brokers, and collecting and receiving the proceeds from any such sale.

I hereby ratify and confirm all acts that my Agent, shall lawfully do or cause to be done by virtue of this power of attorney and the rights hereby granted.

This Limited Power of Attorney and the rights, powers, and authority of my Agent shall become effective immediately upon execution of this instrument. The rights, powers, and authority of this document shall remain in full force and effect thereafter until the above described real estate is sold or transferred and the transaction is completed or in the event of my death, disability or incapacity, or upon my revocation of this document, whichever occurs first. As used herein, "disability" or "incapacity" shall mean a lack of capacity to receive and evaluate information effectively, to communicate decisions, and/or to manage my financial resources and affairs properly.

My Agent shall be entitled to reimbursement of all reasonable expenses incurred as a result of carrying out any provision of this Power of Attorney. Agent may be required to provide an accounting of all funds received and/or disbursed.

If any part of this document is held to be invalid, illegal or unenforceable under applicable law, then the remaining unaffected parts of the document shall still remain in full force and effect and not be affected by any partial invalidity.

Any third party who receives a copy of this document may act under it. Revocation of the power of attorney is not effective as to a third party until the third party has actual knowledge of the revocation. I agree to indemnify the third party for any claims that arise against the third party because of reliance on this power of attorney.

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will be liable for breach of fiduciary duty, failure to act in good faith and/or willful misconduct, while acting under the authority of this Power of Attorney.
I may revoke this Power of Attorney at any time by providing written notice to my Agent.
Signed on 3 April 06 (date), at Chicago Title (city), Anacortes
(state). (U a)
Rahe w S.M-
Signature of Principal
Witness Signature:
Name:
City:
State:
Witness Signature:
Name:
City:
State:
state of WAShington
State of WAShington  County of SICOgit  ss
County of SK2Qit
The foregoing instrument was acknowledged before me this 3 day of April . Sterey make a Principal), who is personally known to me or who
2006 by Roydall W. Steterm (name of Principal), who is personally known to me or who
has produced with the ucene as identification.
Sin Sion Sign
1.5 NOTA . E
Signature of person taking acknowledgment (Notary Public)
200 Ol 200 Ol Total Trois Turney
MASHINGE LANE E. NELSON
Name typed, printed, or stamped

Agent shall not be liable for losses resulting from judgment errors made in good faith. However, Agent

