



200611140132
Skagit County Auditor

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Document Title: Power of Attorney

Reference Number:

Grantor(s):

☐ additional grantor names on page ____

1. Smith, Betty
- 2.

Grantee(s):

☐ additional grantee names on page ____

1. Wallis, Jennie
- 2.

Abbreviated legal description:

☐ full legal on page(s) ____

25-35-01

Assessor Parcel / Tax ID Number:

☐ additional tax parcel number(s) on page ____

P100328

RECORDING REQUESTED BY
AND WHEN RECORDED MAIL TO

Power of Attorney for Real Estate

I, Betty L. Smith, of Anacortes, Skagit,
name of principal city county
WA, appoint Jennie K. Wallis, of Oak Harbor,
state name of attorney-in-fact city
Island, WA,
county state

to act in my place with respect to the real property described as follows:

4019 Peters Lane
Anacortes, WA 98221
PARCEL # P100328
ACCT # 4574-000-014-0003
SKAGIT COUNTY

3903 Tree Lane
Near West Pointe, CA
5.24 Acres Vacant Land
ASMT # 004-015-010-000
Calaveras County

My attorney-in-fact may act for me in any manner to deal with all or any part of any interest in the real property described in this document, under such terms, conditions, and covenants as my attorney-in-fact deems proper. My attorney-in-fact's powers include but are not limited to the power to:

1. Accept as a gift, or as security for a loan, reject, demand, buy, lease, receive, or otherwise acquire ownership or possession of any estate or interest in real property.
2. Sell, exchange, convey with or without covenants, quitclaim, release, surrender, mortgage, encumber, partition or consent to the partitioning of, grant options concerning, lease, sublet, or otherwise dispose of any interest in the real property described in this document.
3. Maintain, repair, improve, insure, rent, lease, and payor contest taxes or assessments on any estate or interest in the real property described in this document.
4. Prosecute, defend, intervene in, submit to arbitration, settle, and propose or accept a compromise with respect to any claim in favor of or against me based on or involving the real property described in this document.

However, my attorney in fact shall not have the power to:



I further grant to my attorney-in-fact full authority to act in any manner both proper and necessary to the exercise of the foregoing powers, including _____

and I ratify every act that my attorney-in-fact may lawfully perform in exercising those powers.

This power of attorney takes effect on Nov. 13, 2006 and shall continue until terminated in writing, or until N/A, _____, whichever comes first.

I agree that 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.

Signed this 13th day November, 2006

State of Washington, County of Skagit

Betty L. Smith
Signature

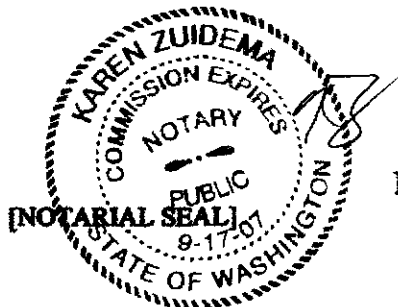
Social Security Number: 519-18-4126

CERTIFICATE OF ACKNOWLEDGMENT OF NOTARY PUBLIC

State of Washington)
County of Skagit) ss

On November 13, 2006 before me, a notary public in and for said state, personally appeared Betty L. Smith, personally 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 to me that he or she executed the same in his or her authorized capacity and that by his or her signature on the instrument, the person, or the entity upon behalf of which the person acted, executed the instrument.

WITNESS my hand and official seal.



Notary Public for the State of Washington

My commission expires: 9/17/07



SIGNATURE OF ATTORNEY-IN-FACT

By accepting or acting under the appointment, the attorney-in-fact assumes the fiduciary and other legal responsibilities of an agent.

Jennie K. Wallis
Signature of Attorney-in-Fact



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