

WHEN RECORDED RETURN TO:



200811250047
Skagit County Auditor

11/25/2008 Page 1 of 3 11:43AM

Chicago Title Insurance Company

425 Commercial Street, Mount Vernon, Washington 98273

DOCUMENT TITLE(s)

1. POWER OF ATTORNEY
- 2.
- 3.

Chicago Title IC46960
IMV3423

REFERENCE NUMBER(s) OF DOCUMENTS ASSIGNED OR RELEASED:

Additional numbers on page _____ of the document

GRANTOR(s):

1. SERGEY BERTASH
- 2.
- 3.

Additional names on page _____ of the document

GRANTEE(s):

1. MARINA BERTASH
- 2.
- 3.

Additional names on page _____ of the document

LEGAL DESCRIPTION: Lot 163, PLAT OF EAGLEMONT PHASE 1B, DIVISION NO. 6, according to the plat thereof recorded January 10, 2006, under Auditor's File No. 200601100170, records of Skagit County Washington.

Complete legal description is on page _____ of the document

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

4883-000-163-0000 P124072

(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.

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.

I, Sergey Bertash, authorize Marina Bertash to sell my property at 4618 South
Beaver Pond Dr Mt. Vernon, WA 98274.



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WASHINGTON SHORT-FORM INDIVIDUAL ACKNOWLEDGMENT (RCW 42.44.100)

State of Washington }
County of Shobomish } ss.

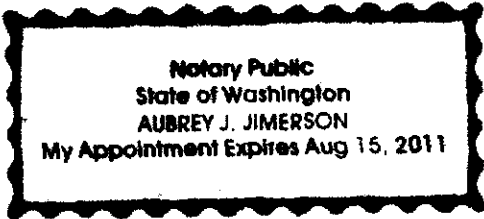
I certify that I know or have satisfactory evidence that Sergey Bertash
Name of Signer

is the person who appeared before me, and said person acknowledged that he/she signed this instrument and acknowledged it to be his/her free and voluntary act for the uses and purposes mentioned in the instrument.

Dated: 7/9/2008
Month/Day/Year

Aubrey J. Jimerson
Signature of Notarizing Officer

NOTARY PUBLIC
Title (Such as "Notary Public")



My appointment expires Aug 15, 2011
Month/Day/Year of Appointment Expiration

Place Notary Seal Above

OPTIONAL

Although the information in this section is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

Description of Attached Document

Title or Type of Document: Authorization

Document Date: _____ Number of Pages: 1

Signer(s) Other Than Named Above: NONE

