



200901260029

Skagit County Auditor

1/26/2009 Page

1 of

2 8:57AM

**RETURN DOCUMENT TO:**

Service Link

4000 Industrial Blvd.

Aliquippa, PA 15001

*Use dark black ink and print legibly. Documents not legible will be rejected per RCW 65.04.045 & 65.04.047***DOCUMENT TITLE(S):**

Special Power of Attorney

**AUDITOR FILE NUMBER & VOL. & PG. NUMBERS OF DOCUMENT(S) BEING ASSIGNED OR RELEASED:**

Additional reference numbers can be found on page \_\_\_\_\_ of document.

**GRANTOR(S):**

Jennifer Lynne Jones

Additional grantor(s) can be found on page \_\_\_\_\_ of document.

**GRANTEE(S):**

Kyle Grantham Rash

Additional grantee(s) can be found on page \_\_\_\_\_ of document.

**ABBREVIATED LEGAL DESCRIPTION: (Lot, block, plat name OR; qtr/qtr, section, township and range OR; unit, building and condo name.)**

Lot 50, Plat of Seaview Division No.4

Skagit Co,  
WA

Additional legal(s) can be found on page \_\_\_\_\_ of document.

**ASSESSOR'S 16-DIGIT PARCEL NUMBER:**

p115960

Additional numbers can be found on page \_\_\_\_\_ of document.

The Auditor/Recorder will rely on the information provided on this form. The responsibility for the accuracy of the indexing information is that of the document preparer.

AFTER RECORDING MAIL TO:

Kyle Rash  
13927 Seaward Ln  
Anacortes, WA  
98221

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

I, JENNIFER LYNNE JONES hereby appoint  
KYLE GRANTHAM RASH  
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 50 PLAT OF SEAVIEW DIVISION NO. 4, ACCORDING TO THE  
PLAT THEREOF, RECORDED IN VOLUME 17 OF PLATS, PAGE 72, RECORDS  
OF SKAGIT COUNTY, WASHINGTON. SITUATED IN SKAGIT COUNTY, WASHINGTON

Abbreviated Legal: LOT 50, Plat of Seaview Division No. 4

Tax Parcel Number(s): 115960

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(s) might or could do if personally present.

This Special Power of Attorney will cease and be of no further effect after the day of, 20, or six (6)  
months from the date hereof, whichever first occurs.

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

DATED this 2nd day of January, 2009

[Signature]  
Date

\_\_\_\_\_  
Date

STATE OF WASHINGTON  
COUNTY OF Skagit

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

Dated: January 2, 2009

[Signature]  
Notary Public in and for the State of Washington  
Residing at Mount Vernon  
My appointment expires: 5/14/11

Cheryl L Trueman



200901260029  
Skagit County Auditor