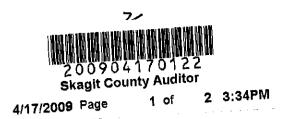
WHEN RECORDED RETURN TO:

CHICAGO TITLE COMPANY PÓ BOX 1228 ANACORTES WA 98221



Chicago Title Insurance Company

425 Commercial Street - Mount Vernon, Washington 98273 620002060 DOCUMENT TITLE(s) POWER OF ATTORNEY 1. 2. 3. REFERENCE NUMBER(s) OF DOCUMENTS ASSIGNED OR RELEASED: Additional numbers on page GRANTOR(s): 1. KRISTOPHER E. OLSEN 2. 3. Additional names on page ______ of the document GRANTEE(s). 1. LUCILLE F. OLSEN 2. 3. Additional names on page _of the document ABBREVIATED LEGAL DESCRIPTION: UNIT 103, CORRECTION OF PLAT OF SKYLINE NO. 15 Complete legal description is on page _____ 2 of the document ASSESSOR'S PROPERTY TAX PARCEL ACCOUNT NUMBER(s): P60083 (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. Signature

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.

Chicago Title Company 3119 Commercial Avenue Anacortes, WA 98221

SPECIAL POWER OF ATTORNEY (SALE)

I, KRISTOPHER E. OLSEN hereby appoint LUCILLE F. OLSEN as my true and lawful attorney for me and in my name and stead, and for my use and benefit to bargain, sell, contract to convey, or convey any and all right, title, interest in and to the following described real property:

Unit 103, CORRECTION OF PLAT OF SKYLINE NO. 15 (a condominium), also appearing of record as Parkside Condominiums, according to amended Declaration thereof, recorded February 17, 1970, under Auditor's File No. 736037, records of Skagit County, Washington, in Volume 9 of Plats, pages 91 through 94, records of Skagit County, Washington.

Situated in Skagit County, Washington

Tax Account No.: P 60083

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 might or could do if personally

of. This Special Power of Attorney will cease and be of no further effect after the day 2009, or six (6) months from the date hereof, whichever first occurs. Apri DATED this _____ _day of _ WARNING: This power of attorney will result in another person having full right to sell your property. It is recommended that you obtain counsel from your attorney prior to execution of this document.

KRISTOPHER E. OLSEN

STATE OF

OKLAHOMA

COUNTY OF

DKLA HOMA

I certify that I know or have satisfactory evidence that KRISTOPHER E. OLSEN the person(s) who appeared before me, and said person(s) acknowledged that they signed this instrument and acknowledged it to be their free and voluntary act for the uses and purposes therein mentioned in this instrument.

Notary Public in and for the State of Residing at 20 Mand, of

My appointment expires:

LPB-70 1/97

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