After recording return to: Trenton E. Tanski Heather M. Tanski 3701 Cedar Glen Way Anacortes, WA 98221



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Reference: 30031449--317--CR2
LAND TITLE OF SKAGIT COUNTY

135040 + 64

DOCUMENT TITLE(S): POWER OF ATTORNEY

REFERENCE NUMBER(S) OF DOCUMENTS ASSIGNED OR RELEASED:

GRANTOR(S): HEATHER M. TANSKI

**GRANTEE(S): TRENTON E. TANSKI** 

ABBREVIATED LEGAL DESCRIPTION: Lot 19, Amended Cedar Glen Plat

TAX PARCEL NUMBER(S): 47900000190000 | P118855

## SPECIAL POWER OF ATTORNEY

## KNOW ALL PERSONS BY THESE PRESENTS:

That I, Heather M. Tanski, currently residing at 8804 Whispering Oaks Trail, New Port Richey, FL, by this document do make and appoint Trenton E. Tanski, whose present address is Naval Air Station Whidbey Island, Oak Harbor, WA, as my true and lawful attorney-in-fact to do and execute any or all of the following acts or things:

To make, indorse, accept, receive, sign, seal, execute, acknowledge, and deliver any documents, instruments, or paper necessary or convenient to purchase in my name and for my use the below-described real property at the single family home at 3701 Cedar Glen Way, Anacortes, County of Sagit, state of Washington 98221, and to enter into both a contract and a mortgage for such price, at such rate of interest and upon such terms as to him shall seem best, and further, to record this Power of Attorney in the clerk's office of the county of Sagit, state of Washington prior to engaging in any of the above-authorized transactions.

I HEREBY GIVE AND GRANT TO my said attorney-in-fact full power and authority to perform every act and thing whatsoever that is necessary or appropriate to accomplish the purposes for which this Power of Attorney is granted, as fully and effectually as I could do if I were present; and I hereby ratify all that my said attorney-in-fact shall lawfully do or cause to be done by virtue of this document.

**PROVIDED**, however, that all business transacted hereunder for me or for my account shall be transacted in my name, and that all endorsements and instruments executed by my said attorney-in-fact for the purpose of carrying out the foregoing powers shall contain my name, followed by that of my said attorney-in-fact and the designation "attorney-in-fact."

I FURTHER DECLARE that any act or thing lawfully done hereunder by my said attorney-in-fact shall be binding on myself and my heirs, legal and personal representatives and assigns, whether the same shall have been done either before or after my death, or other revocation of this instrument.

FURTHER, this power of attorney shall remain in full force and effect until 12 January 2011, unless sooner revoked by me, provided, however, that such prior revocation shall be of no

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effect in respect to parties acting or things done in reliance hereon prior to receipt by them of such notice of revocation as may be prescribed by law.

IN WITNESS WHEREOF, I have hereunto set my hand and seal on this day 29 January 2010, Grantor's Signature ACKNOWLEDGEMENT Name of Notary SUSAN J CORWIN Notary Public - State of Florida Location > My Comm. Expires Jan 24, 2013 City, State Commission # DD 826965 **Commission Expires** Signature of Notary **Identification Presented: Date of Notarization** Date (mm/dd/yyyy) Driver's License () Passport () Military Identification () Other Issue Date 2/27 Place of Issue Florido ID Number 7520333755250

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