

WHEN RECORDED RETURN TO:

CHICAGO TITLE COMPANY
425 COMMERCIAL STREET
MOUNT VERNON WA 98273



201207120036
Skagit County Auditor

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Chicago Title Insurance Company

425 Commercial Street, Mount Vernon, Washington 98273 620015920

DOCUMENT TITLE(s)

1. STATUTORY DURABLE POWER OF ATTORNEY
- 2.
- 3.

REFERENCE NUMBER(s) OF DOCUMENTS ASSIGNED OR RELEASED:

☐ Additional numbers on page _____ of the document

GRANTOR(s):

1. **GALE M. POINDEXTER**
- 2.
- 3.

☐ Additional names on page _____ of the document

GRANTEE(s):

1. **BILLY D. POINDEXTER**
- 2.
- 3.

☐ Additional names on page _____ of the document

ABBREVIATED LEGAL DESCRIPTION:

LOT 3, MADDOX CREEK P.U.D. PHASE I

☐ Complete legal description is on page 2 of the document

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

P109308

☐ (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.

STATUTORY DURABLE POWER OF ATTORNEY
(Special Power of Attorney for Specific Real Estate)

NOTICE: THE POWERS GRANTED BY THIS DOCUMENT ARE BROAD AND SWEEPING. IF YOU HAVE ANY QUESTIONS ABOUT THESE POWERS, OBTAIN COMPETENT LEGAL ADVICE. THIS DOCUMENT DOES NOT AUTHORIZE ANYONE TO MAKE MEDICAL AND OTHER HEALTH-CARE DECISIONS FOR YOU. YOU MAY REVOKE THIS POWER OF ATTORNEY IF YOU LATER WISH TO DO SO.

I, Gale M. Poindexter
whose address is 12264 N. 164th E Place, Collinsville, OK 74021
appoint Billy D. Poindexter
as my agent (attorney-in-fact) to act for me in any lawful way with respect to the following subjects:

(A) Real property transactions involving the Property hereinafter described;
and/or

(B) Banking and other financial institution transactions involving the Property
hereinafter described.

In addition to and without in any way limiting the foregoing, my agent and attorney-in-fact named above shall have the power of sale, purchase, acquisition, mortgage, refinance, management, disposition and/or control of any or all of the following "Property"):

(Property address): 3216 Shelly Hill Road
Mount Vernon, WA 98274-6134

(Property legal description):

Lot 3, MADDOX CREEK P.U.D. PHASE I, according to the plat thereof, recorded in Volume 16 of Plats, pages 121 through 130, records of Skagit County, Washington.



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In addition to and without limiting the foregoing, my agent and attorney- in- fact shall further have the power and authority, with respect to any or all of the Property, and as my attorney-in-fact shall deem to be necessary, desirable or appropriate: To sell, convey, purchase, refinance, acquire, and/or contract to purchase or sell, for such sum, on such terms, with such parties and with such agreements as my agent and attorney-in-fact shall determine; to make, execute, deliver and acknowledge deeds of trust, mortgages, security agreements, financing statements, mechanics lien contracts, construction loan agreements, interim and/or long term financing agreements, and other forms of encumbrances; to contract debts, liens, or obligations with reference thereto and to evidence the same by the execution of promissory notes or other written evidence thereof; to execute and deliver releases and partial releases, to execute, acknowledge and deliver all deeds, instruments, certificates, closing statements, affidavits and other documents in connection with any of the foregoing; and to complete, modify or change any of such documents previously or hereafter executed by me and initial such completions, modifications and changes on my behalf. In addition to and without limiting the foregoing, I hereby vest in my said agent full power and authority to do and perform all and every act and thing whatsoever in connection with the Property as fully, and for all purposes, as I might or could do if personally present, hereby ratifying and confirming whatsoever my said agent and attorney - in - fact shall or may do by virtue hereof.

This power of attorney may be voluntarily revoked only by a written instrument of revocation executed by me and filed for record in the office of the county clerk of the county in which the Property is located; provided, however, that IF THIS POWER OF ATTORNEY HAS NOT BEEN SOONER REVOKED, IT SHALL, IN ANY EVENT, BE AUTOMATICALLY REVOKED AND TERMINATED AND SHALL BECOME NULL AND VOID AND WITHOUT ANY FURTHER ACTION ONE YEAR FROM THE EFFECTIVE DATE SET OUT BELOW.

THIS POWER OF ATTORNEY IS NOT AFFECTED BY MY SUBSEQUENT MENTAL OR PHYSICAL DISABILITY OR INCAPACITY.

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 receives actual notice 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.

Executed on the date of the acknowledgment set forth below (the "Effective Date").

x

Gale M. Poindexter

Printed Name: _____

Gale M. Poindexter



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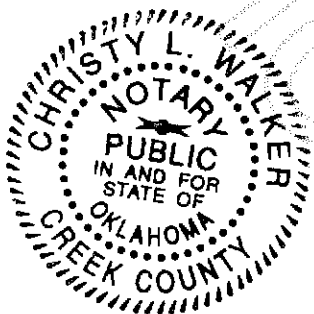
Skagit County Auditor

STATE OF Oklahoma

COUNTY OF Tulsa

This instrument was acknowledged before me on the 5 day of
July, 2012 by Gale M. Poindexter

(seal)



Christy L. Walker

Notary Public, State of Oklahoma

Christy L Walker
(Notary's Typed/Printed Name)

My commission expires: 10/27/14
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