

POOR ORIGINAL

When recorded return to:
Michael Ryan and Sara Ryan
5177 E. Harbor Road
Freeland, WA 98249



201508140066

Filed for record at the request of:

Skagit County Auditor \$73.00
8/14/2015 Page 1 of 2 12:01PM



CHICAGO TITLE

COMPANY OF WASHINGTON

425 Commercial St
Mount Vernon, WA 98273

Escrow No.: 620024930

CHICAGO TITLE
SPECIAL POWER OF ATTORNEY
Sale

I, Sara Ryan, hereby appoint Michael Ryan 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:

Lots 9 and 10, CASCADE RIVER PARK NO. 1, according to the plat thereof recorded in Volume 8 of Plats, pages 55 through 59, records of Skagit County, Washington.

Situated in Skagit County, Washington

Abbreviated Legal: (Required if full legal not inserted above.)

Tax Parcel Number(s): P63556 / 3871-000-010-0008

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 6th day of February, 2016, 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 sell your property. It is recommended that you obtain counsel from your attorney prior to execution of this document.

Dated: August 6, 2015

Sara Ryan

SPECIAL POWER OF ATTORNEY

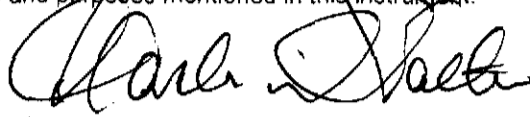
Sale

(continued)

State of Arizona
County of Maricopa

I certify that I know or have satisfactory evidence that Sara Ryan 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 this instrument.

Dated: 8-6-11



Name: Charles D. Walters
Notary Public in and for the State of Arizona
Residing at: 4856 N 159th Dr Surprise, AZ
My appointment expires: 6-12-17

