

CHICAGO TITLE CO.

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POWER OF ATTORNEY WITH VETERANS ADMINISTRATION ENTITLEMENT

STATE OF Washington

COUNTY OF Snohomish

KNOW ALL MEN BY THESE PRESENTS, that I, <u>Paul J. Haedt</u>, of <u>Snohomish</u> (County), <u>Washington</u> (State), have made, constituted and appointed and by these presents do make, constitute and appoint <u>Jenifer D. Haedt</u>, of <u>Snohomish</u> (County), <u>Washington</u> (State), my true and lawful agent and attorney-in-fact (hereinafter referred to as "attorney"), for me and in my name, place and stead to make, execute, acknowledge, amend, modify and deliver in my name such notes, agreements, promises to pay, affidavits, closing statements, contracts, instruments of conveyance, mortgage or lease, and any and all other instruments, agreements and documents as my said attorney may deem appropriate and which are in any way related to any transaction involving the purchase and financing of the following described property (the "Property"):

Lot 23, SAUK MOUNTAIN VIEW ESTATES SOUTH - A PLANNED RESIDENTIAL DEVELOPMENT PHASE 3, according to the plat thereof recorded May 26, 2005, under Auditor's File No. 200505260107, records of Skagit County, Washington

Situated in Skagit County, Washington

Locally Known As:

1227 Arrezo Drive

Sedro Wooleey, WA 98284

My attorney shall have the power to use my Veterans Administration Entitlement for the purchase of the Property, up to and including the Sales Price of \$218,600.00, and to execute, acknowledge, amend, modify, and deliver in my name, such documents as are required to evidence or secure a loan, which I will be obligated to repay, in the amount of \$223,299.00; such documents shall include, but shall not be limited to, any and all security instruments required to evidence or create a lien against the Property. The Property is being purchased for occupancy by me and/or my family as a permanent residence.

All powers and authorities hereby granted may be exercised by my said attorney acting alone without the joinder of any other person.

This power of attorney shall not terminate on or be affected by the disability or incapacity of the principal.

The attorney named herein shall not be obligated to furnish bond or other security.

Any authority granted to my attorney herein shall be limited so as to prevent this power of attorney from causing my attorney to be taxed on my income and from causing my estate to be subject to a general power of appointment by my attorney, as that term in defined in Section 2041 of the Internal Revenue Code.

I hereby ratify and confirm all that my attorney, or his successors, shall lawfully do or cause to be done by virtue of this power of attorney and the rights and powers granted herein.

Thereby bind myself to indemnify my attorney herein named and any successor who shall so act against any and all claims, liabilities, demands, losses, damages, actions and causes of action, including expenses, costs and reasonable attorneys' fees which my attorney at any time may sustain or incur in connection with his carrying out the authority granted him in this power of attorney.

This power of attorney and the powers herein granted shall terminate upon the earliest occurrence of (I) my death, (ii) revocation by an instrument in writing, duly executed and acknowledged by me and filed for record in the office of the County Clerk of the County and State in which the Property is located, as well as in any other County and State in which this power of attorney is filed for record, or (iii) the expiration of a period of time ending 3/2006, which period shall not exceed three (3) months from the date the above-referenced loan is closed. It is my intention that any person or any firm, corporation, joint venture, association or other legal entity of any kind of character dealing with my said attorney, or his substitute or substitutes, shall be entitled to rely on the provisions of this paragraph in determining whether or not this power of attorney has been revoked, and I hereby represent to those dealing with my said attorney, or his been revoked, and I hereby represent to those dealing with my said attorney, or his substitute or substitutes, that they are entitled to rely upon the terms and provisions of this paragraph in determining whether this power of attorney has been revoked.

Signed this day of 2000
Vand Hate
PRINCIPAL
Paul Harry
Printed Name
IN WITNESS WHEREOF, I have hereunto set my hand this day of
au 2000
Witness
Witness
STATE OF COUNTY OF SINCE OF SINCE OF COUNTY OF SINCE OF COUNTY OF SINCE OF COUNTY OF SINC
BEFORE ME, the undersigned authority, a Notary Public in and for said County and State, on this day personally appeared the county is the county and state.
to me to be the person whose name is subscribed to the foregoing instrument, and
acknowledged to me that he executed the same for the purposes and consideration therein expressed.
GIVEN UNDER MY HAND AND SEAL-OF OFFICE this the day of
200
Notary Public in and for the State of
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This Instrument Brepared By
My Commission Expires: 11
PUBLIC /S
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