

140365

When Recorded Return to:
 Rita Santillan
 PO Box 541
 Stevenson, WA 98648

BOOK 206 PAGE 505

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 SKAMANIA CO. WASH
 BY Rita Santillan

FEB 8 1 52 PM '01
 P. Lowry
 AUDITOR
 GARY M. OLSON

SPECIAL POWER OF ATTORNEY (With Durable Provisions)

Indexing information required by the Washington State Auditor's/Recorder's Office, (RCW 86.16 and RCW 86.04) 1/97:		(please print last name first)
Reference # (if applicable): _____		
Grantor(s): (1) _____	(2) _____	Add'l. on pg _____
Grantee(s): (1) _____	(2) _____	
Add'l. on page _____ Legal Description (abbreviated): _____		
Add'l. legal is on page _____ Assessor's Property Tax Parcel /Account # _____		

KNOW ALL PERSONS BY THESE PRESENTS: That David Curtiss Hudson residing at Clallam Bay Correction Center City of Clallam Bay County of Clallam State of Washington has made, constituted and appointed, and by these presents he make, constitute and appoint Rita Arlene Santillan of the City of Stevenson County of Skamania State of Washington My true and lawful attorney for the Above and in the name of, place and stead, and for the use and benefit

1. To received Any And All checks or, funds in my name.
2. To open in my name Any And All saving Accounts At Any bank or Financial Institution.
3. To fulfill Any And All obligations AS I would so be able to do myself in Person.
4. Have Authority to sign All documents in my Name AS if I was there in Person.

Witnesses
 Signed David Curtiss Hudson
 Signed Rita Arlene Santillan
 Signed _____
 Signed _____

GIVING AND GRANTING unto the Above said attorney all full power and authority to do and perform all and every act and thing whatsoever requisite and necessary to the execution of the powers herein granted, as fully to all intents and purposes as I might or could do if personally present, David Curtiss Hudson hereby ratifying and confirming all that the said attorney Rita Arlene Santillan shall lawfully do or cause to be done by virtue of these presents, Mr. Gary A. Walker

POWER OF ATTORNEY—1

This power of Attorney ☒ shall be revoked upon ☒ shall become effective upon ☐ shall not be affected by disability of the principal, and shall otherwise ☐ continue in full force and effect until revoked by subsequent writing ☒ becomes null and void after the 1st day of June, 2001.

(Optional) The said N/A further nomi-
nates N/A as guardian of
N/A estate and person for consideration by the court if protective proceedings for N/A estate or person
are hereafter commenced.

In Witness Whereof David Hudson have hereunto set my hand on the 11 day of
JAN, 2001.

David Curtiss Hudson
David Curtiss Hudson

Signed and Delivered in the Presence of

Kathy Barnett-Chaney
Notary

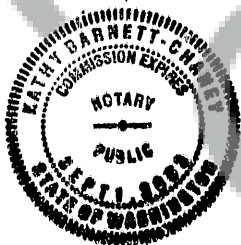
STATE OF WASHINGTON,

County of Clallam

ss. (INDIVIDUAL ACKNOWLEDGEMENT)

I certify that I know or have satisfactory evidence that David Curtiss Hudson is the
person who appeared before me, and said person acknowledged that he signed this instrument and acknowledged it to be
his free and voluntary act for the uses and purposes mentioned in the instrument.

Dated this 11th day of January, 2001.



Kathy Barnett-Chaney
Print Name Kathy Barnett-Chaney
Notary Public in and for the State of WA
My appointment expires: 9/1/03