

146820

BOOK 233 PAGE 432

FILED IN RECORD
SPRINGFIELD, WASH.
BY KALLAGIA CO. TITLE

When recorded, mail to:

Name: Wind Mountain Dev.Address: 72 Desolation Rd.City/State/Zip Code: Stevenson, WA98648

DEC 10 11 16 AM '02

P. Lowry
J. MICHAEL L. RYANSON

Space above this line for Recorder's use

SLTC 25246

**SPECIAL DURABLE FINANCIAL
POWER OF ATTORNEY**

KNOW ALL MEN BY THESE PRESENTS:

That I, EDWARD A. BAMBAUERthe undersigned principal, whose address is 1209 N CAMBRIDGE CIRCLE CHANDLER
AZ 85225by this instrument, hereby constitute and appoint
GERALD BARNES, whose address is62 DESOLATION RD STEVENSON WASHINGTON 98648
as my Agent to act in my name, place and stead, and for my use and benefit as if I were personally present to
transact such business and perform every act requisite and necessary to: WIND MOUNTAIN
DEVELOPMENT LLC OF WHICH I AM 25% OWNER

FURTHERMORE, I specifically authorize my above named Agent to:

- a) buy, sell, contract, receive, possess, transfer, lease, let, demise, remise, release, encumber, hypothecate or mortgage, whichever is applicable to accomplish the objectives heretofore described.
- b) sign, seal deliver or otherwise execute and/or acknowledge any and all instruments, papers or documents requisite and necessary to accomplish the objectives heretofore described.
- c) Other authority(ies) not previously mentioned include: _____

GIVING AND GRANTING unto said Agent, full power and authority to transact any business, perform every act and thing whatsoever requisite and necessary to fully accomplish the intents and purposes of this Special Power of Attorney, and therefore, I hereby ratify and confirm every act that said Agent shall lawfully do or cause to be done by virtue of these presents.

The validity of this Special Power of Attorney shall not be affected by my subsequent disability, incapacity or the lapse of time, and shall continue in full force and effect during my lifetime unless sooner revoked or terminated by me in writing.

(Continued on Back Side)

IN WITNESS WHEREOF, I, have hereunto set my hand this 1 day of February, 2002.

Audi Bamfauer
Signature of Witness
1209 N Cambridge Circle
Address of Witness
Chandler AZ 85225
City/State/Zip Code

Ed A. Bamfauer
Signature of Principal
1209 N Cambridge Circle
Address of Principal
CHANDLER AZ 85225
City/State/Zip Code

ACKNOWLEDGMENT OF PRINCIPAL

I, EDWARD A. BAMBAUER, the principal, sign my name to this power of attorney this 1 day of FEB., 2002, and being first duly sworn, do declare to the undersigned authority that I sign and execute this instrument as my power of attorney and that I sign it willingly, or willingly direct another to sign for me, that I execute it as my free and voluntary act for the purposes expressed in the power of attorney and that I am eighteen years of age or older, of sound mind and under no constraint or undue influence.

Ed A. Bamfauer
Signature of Principal

AFFIDAVIT OF WITNESS

I, Wm Kennedy, the witness, sign my name to the foregoing power of attorney being first duly sworn and do declare to the undersigned authority that the principal signs and executes this instrument as his/her power of attorney and that he/she signs it willingly, or willingly directs another to sign for him/her, and that I in the presence and hearing of the principal, sign this power of attorney as witness to the principal's signing and that to the best of my knowledge the principal is eighteen years of age or older, of sound mind and under no constraint or undue influence.

Wm Kennedy
Signature of Witness

State of Arizona)
County of Maricopa) ss.

SUBSCRIBED, SWORN TO AND ACKNOWLEDGED before me by X EDWARD A. BAMBAUER, the principal, and subscribed and sworn to before me by X Ed A. Bamfauer, the witness, this 1 day of Feb, 2002.

My Commission Expires: _____
Notary Public
Notary Public State of Arizona
Maricopa County
William Kennedy
Expires July 20, 2003

If acknowledged in State of Florida, complete section below:
(Principal) ☐ Personally Known (or) ☐ Produced Identification
If applicable, Type of Identification Produced: _____
(Witness) ☐ Personally Known (or) ☐ Produced Identification
If applicable, Type of Identification Produced: _____

RECORDER'S NOTE:
NOT AN ORIGINAL DOCUMENT