

136235

BOOK 193 PAGE 63

Return Address:

FILED
SEAL
CLARE COUNTY TITLE

SEP 10 1 18 PM '99

Q Lowry

GARY L. OLSON

Linda D. Durdel
33762 SR-14
Skamania, WA 98648

Document Title(s) (for transactions contained therein):	
1. Power of Attorney	
2.	
3.	
4.	
Reference Number(s) of Documents assigned or released: (on page ___ of document(s))	
Grantor(s)	
1. Bobby V. Durdel	
2.	
3.	
4.	
Additional Names on page ___ of document.	
Grantee(s)	
1. Linda D. Durdel	
2.	
3.	
4.	
Additional Names on page ___ of document.	
Legal Description (abbreviated i.e. lot, block, plat or section, township, range)	
#1100 Section 35, Township 2, Range 6	<div>Proposed <input checked="" type="checkbox"/></div> <div>Recorded <input checked="" type="checkbox"/></div> <div>Indexed <input checked="" type="checkbox"/></div> <div>Filed <input checked="" type="checkbox"/></div> <div>Released <input checked="" type="checkbox"/></div>
Additional legal is on page 2 of document.	
Assessor's Property Tax Parcel/Account Number	
02-06-35-0-0-1100-00	
The Auditor/Recorder will rely on information provided on the form. The staff will not read the document to verify the accuracy or completeness of the indexing information provided herein.	

NS

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POWER OF ATTORNEY

BOBBY V. DURDEL

LINDA D. DURDEL

After recording, return to (Name, Address, Zip):

Bobby & Linda Durdal

33762 SR 14

Skamania, WA, 98648

SPACE RESERVED
FOR
RECORDER'S USE

STATE OF OREGON,

County of _____ } ss.

I certify that the within instrument
was received for record on the _____ day
of _____, 19____, at
_____ o'clock _____ M., and recorded in
book/reel/volume No. _____ on page
_____ and/or as fee/file/instru-
ment/microfilm/reception No. _____,
Records of said County.

Witness my hand and seal of County
affixed.

NAME

TITLE

By _____, Deputy.

KNOW ALL BY THESE PRESENTS that I, Bobby V. Durdal
have made, constituted and appointed and by these presents do make, constitute and appoint Linda D. Durdal

my true and lawful attorney, for me and in my name, place and stead and for my use and benefit, to
execute any and all escrow instructions prepared by Crossland Mortgage Corp.,
including, but not limited to, a Note and Trust Deed. And any other documents
necessary to complete the closing of the refinance of the property located at:

33762 SR 14, ^{Stevenson}~~Skamania~~, Washington, 98648

Legally known as:

TL 1100, Section 35, Township 2, Range 8 (See Exhibit A, Attached)

giving and granting unto my attorney the full power and authority to do and perform each and every act and thing whatsoever
requisite and necessary to be done, as fully, to all intents and purposes, as I might or could do if personally present, hereby ratifying
and confirming all that my attorney lawfully does or causes to be done by virtue hereof.

In construing this instrument, and where the context so requires, the singular includes the plural.

Dated 8-31, 1999.

Bobby V. Durdal
Linda D. Durdal

STATE OF OREGON, County of _____

This instrument was acknowledged before me on August 31st, 1999.by them

OFFICIAL SEAL
CHRISTA LORETTE MORRIS
NOTARY PUBLIC-OREGON
COMMISSION NO. 055456
MY COMMISSION EXPIRES AUG. 05, 2000

Christa Lorette Morris
Notary Public for Oregon

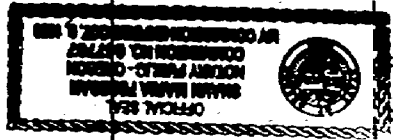
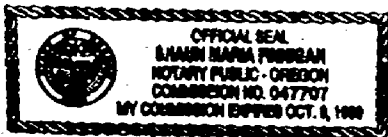
My commission expires 8-5-00

EXHIBIT A

A TRACT OF LAND IN THE NORTHWEST QUARTER OF SECTION 35, TOWNSHIP 2 NORTH, RANGE 6 EAST OF THE WILLAMETTE MERIDIAN, IN THE COUNTY OF SKAMANIA, STATE OF WASHINGTON, DESCRIBED AS FOLLOWS:

COMMENCING AT A REINFORCED CONCRETE MONUMENT 6 INCHES IN DIAMETER SET IN THE GROUND APPROXIMATELY 30 FEET FROM THE CENTER OF STATE HIGHWAY NO. 8, IN SAID SECTION 35, PLACED PURSUANT TO AGREEMENT RECORDED AT PAGE 267, BOOK 31 OF DEEDS, RECORDS OF SKAMANIA COUNTY, STATE OF WASHINGTON WHICH IS THE INITIAL POINT OF THE PROPERTY HEREBY DESCRIBED; THENCE FROM SAID INITIAL POINT IN A WESTERLY DIRECTION ALONG THE SOUTH BOUNDARY OF STATE HIGHWAY NO. 8 RIGHT OF WAY TO A POINT WHERE THE SOUTH BOUNDARY OF THE SAID HIGHWAY INTERSECTS THE NORTH BOUNDARY OF THE S.P. & S. RAILWAY RIGHT OF WAY TO A POINT DUE SOUTH OF THE INITIAL POINT; THENCE NORTH TO THE INITIAL POINT.





6 SIGNATURE OF LEGAL OWNER					
SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE / REMOVAL FROM REAL PROPERTY.					
Signature of Legal Owner and Title, IF APPLICABLE <u>Dora & Daley</u>					
Signature of Additional Legal Owner and Title, IF APPLICABLE _____					
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE			
		State of Washington County of <u>Washington</u>		Signed or attested before me on <u>8.24.99</u>	
		PRINT NAME OF LEGAL OWNER		Signature <u>Shawn M. Finnigan</u>	
		PRINT NAME OF LEGAL OWNER		NOTARY OR AGENT <u>Shawn M. Finnigan</u>	
		Title		PRINTED NAME OF NOTARY	
		DEALERSHIP POSITION/AGENT/NOTARY		County/Office No. OR <u>047707</u> AND: Dealer No. OR Notary Expiration Date <u>10-9-99</u>	
7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)					
The South Half of the Northwest Quarter of the Northeast quarter of the Northwest Quarter of Section 35, Township 4 North, Range 7 East of the Willamette Meridian, Skamania County, Washington.					
Also known as Lot 2 of the GEORGE T. HOLLENBERRY SHORT PLAT as filed for record in Book 2 of Short Plats, Page 143, records of Skamania County, Washington.					
8 DEALER'S REPORT OF SALE					
I CERTIFY THAT THIS INFORMATION IS CORRECT. THE VEHICLE IS CLEAR OF ENCUMBRANCES EXCEPT AS SHOWN. ANY REQUIRED SALES TAX HAS BEEN COLLECTED.					
DEALER NAME (TYPED OR PRINTED)			WA DEALER NUMBER	DATE OF SALE	
PURCHASE PRICE	TAX JURISDICTION/TAX RATE	DEALER'S AUTHORIZED SIGNATURE			
<input type="checkbox"/> USE TAX EXEMPT Sale to a Certified Tribal member on the reservation (attach notarized statement of delivery).					
9 COUNTY AUDITOR/AGENT LICENSING OFFICE APPROVAL: (Not for use by Subagents)					
I certify that the above application appears to have been completed correctly, and the applicant has sufficient documentation to proceed with the recording of this form.					
NAME (TYPED OR PRINTED) <u>Angele Moser</u>			COUNTY OFFICE/VS OPERATOR NUMBER <u>30-01-08</u>		
SIGNATURE <u>Angele Moser</u>			DATE <u>9-13-99</u>		
10 TITLE FEES					
FILED FEE	APPLICATION	MOBILE HOME FEE	ELIMINATION FEE	USE TAX	SUBAGENT FEES
					TOTAL FEES & TAX
<p>IMPORTANT: Once the application has been approved by the County Auditor / Vehicle Licensing Office, take your application form to the County Recording Office. Retain proof of the recording fees paid. If the Recording Office retains your original application form, obtain a certified copy of the recorded form.</p> <p>APPLICANTS: Once recorded, you must return to a Vehicle Licensing office to file the Manufactured Home Application, paying all required fees. Vehicle licensing subagents charge a service fee.</p> <p>For full instructions on completing this form for Title Elimination, Removal from Real Property or Transfer in Location, see form TD-420-730, Manufactured Home Application Instructions.</p>					

The Department of Licensing has a policy of providing equal access to its services. If you need special accommodation, please call (360) 902-3600 or TDD (360) 664-8885.