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FILED FOR RECORD
SKAMANIA CO. WASH.
BY Connie Chidester

Nov 1 12 30 PM '00

Laury
AUDITOR
GARY H. OLSON

Return Address:

Connie Chidester
PO Box 63
Stevenson WA 98648**SPECIAL POWER OF ATTORNEY** (With Durable Provisions)

Indexing information required by the Washington State Auditor's Recorder's Office. (RCW 36.18 and RCW 65.04) 1/97.		(please print last name first)
Reference # (if applicable):		
Grantor(s): (1)	(2)	Addl. on pg.
Grantee(s): (1)	(2)	
Addl. on page	Legal Description (abbreviated):	
Addl. legal is on page	Assessor's Property Tax Parcel /Account #	

KNOW ALL PERSONS BY THESE PRESENTS: That Connie I. Chidester
residing at 501 Rock Creek Dr. #6, City of Stevenson
County of SKAMANIA, State of WASH. 18648 made, constituted and
appointed, and by these presents I make, constitute and appoint Sandra M. Long
of the City of Stevenson, County of SKAMANIA, State of WASH.
my true and lawful attorney for me, and in my name, place and stead, and for my
use and benefit

To Cash Monthly SSI check
and pay my bills

Exp. Date 12/31/00
Notarized 11/1/00
Signed 11/1/00
Notary Laury
Notary GARY H. OLSON

GIVING AND GRANTING unto the said attorney 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. I, Connie I. Chidester hereby
ratifying and confirming all that the said attorney Sandra M. Long shall
lawfully do or cause to be done by virtue of these presents.



Special Power of Attorney With Durable Provisions
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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 ... become null and void after the 7 day of Nov. 00 00.

(Optional) The said _____ further nominates _____ as guardian of _____ estate and person for consideration by the court if protective proceedings for _____ estate or person are hereafter commenced.

In Witness Whereof, _____ have hereunto set _____ hand _____ the _____ day of _____

Connie Chidester

Signed and Delivered in the Presence of

R. Ellen Calenderia
Sandra M. Long

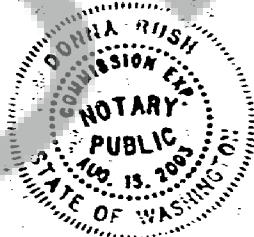
STATE OF WASHINGTON,

County of Skamania

§5. (INDIVIDUAL ACKNOWLEDGEMENT)

I certify that I know or have satisfactory evidence that Connie Chidester is the person who appeared before me, and said person acknowledged that she signed this instrument and acknowledged it to be her free and voluntary act for the uses and purposes mentioned in the instrument.

Dated this 1st day of November 2000.



Donna Riish
Print Name DONNA RIISH
Notary Public in and for the State of WASH
My appointment expires: 8-15-03