

AFTER RECORDING MAIL TO:

Name SLM FINANCIAL CORPORATION

Address 6000 Commerce Parkway Ste A

City/State Mt Laurel, NJ 08054

oatc 30617

Document Title(s): (or transactions contained therein)

1. MANUFACTURED HOUSING LIMITED POWER OF ATTORNEY
- 2.
- 3.
- 4.



First American Title Insurance Company

(this space for title company use only)

Reference Number(s) of Documents assigned or released:

Additional numbers on page _____ of document

Grantor(s): (Last name first, then first name and initials)

1. COX, BRADEN D.
2. COX, CHRISTINA A.
- 3.
- 4.
5. Additional names on page _____ of document

Grantee(s): (Last name first, then first name and initials)

1. "Lender" is SLM FINANCIAL CORPORATION
2. "Trustee" is JOANNE JACKSON
- 3.
- 4.
5. Additional names on page _____ of document

Abbreviated Legal Description as follows: (i.e. lot/block/plat or section/township/range/quarter/quarter)

Lot 20, RUSSELL'S MEADOWS SUBDIVISION, according to the recorded Plat thereof, recorded in Book 'B' of Plats, Page 102, in the County of Skamania, State of Washington. TOGETHER with an undivided 1/31 interest in the Pond known as Lots 2 and 3 of the Russell's Meadows Subdivision, recorded in Book 'B' of Plats, Page 102, Skamania County Records.

Complete legal description is on page _____ of document

Assessor's Property Tax Parcel / Account Number(s): 03-08-17-2-3-0420-00

WA-1

NOTE: The auditor/recorder will rely on the information on the form. The staff will not read the document to verify the accuracy or completeness of the indexing information provided herein.

After Recording Return To:
SLM FINANCIAL CORPORATION
6000 COMMERCE PARKWAY SUITE A
MT LAUREL, NJ 08054
(856) 642-8200

Prepared By:
STACY EAGER
SLM FINANCIAL CORPORATION
6000 COMMERCE PARKWAY SUITE A
MT LAUREL, NJ 08054
(856) 642-8200

MANUFACTURED HOUSING LIMITED POWER OF ATTORNEY

COX
Loan #: 8530800324
MIN: 10009100000041127

THE UNDERSIGNED hereby appoints **SLM FINANCIAL CORPORATION**, and its successor and/or assigns, as Lender Name my/our true and lawful Attorney-in-Fact, with power of substitution and revocations, to apply for a certificate of title or duplicate certificate of title to or record a lien and register and/or to transfer or assign the title to any person the below ("Collateral"): along with the following actions as though executed by me/us.

- (1) To execute in my/our behalf as my/our Attorney-in-Fact whatever documents are necessary to effectuate the sale of the Collateral in the event of a default by me/us under my/our Manufactured Home Installment Note, Security Agreement and Disclosure Statement, as applicable (the "Contract") which results in a repossession and sale of the Collateral securing the Contract, subject to the terms of the Contract and applicable state law governing disposition of the Collateral; or
- (2) For said purpose(s) to sign my/our name(s) and to do all things necessary to appointment, and to transfer or assign title to any property taken in trade or consideration for the purchase of the below described Collateral.
- (3) Re-title the Collateral to correct any errors or to ensure the proper perfection security interest in the Collateral.
- (4) To execute documents necessary to obtain and maintain insurance on the property and to receive, complete, execute or endorse, and deliver in my name or Lender's name any and all claim forms, agreements, assignments, releases, checks, drafts or other instruments and vehicles for the payment of money, relating to any insurance covering the Manufactured Home, the indebtedness secured by the Manufactured Home or the Real Property.

This limited Power of Attorney ("POA") shall be durable and not be affected by subsequent disability or incapacity of the principal, or by the lapse of time. This POA shall not be construed as a waiver of my/or rights under the Contract or applicable state law governing the Contract and the sale of Collateral.

8530800324

Description of Collateral:

Manufacturer: **MARLETTE**
Model:
Year: **05-07-2003**
Width/Length: **56 / 27**
Serial Number: **H021950 A/B**
New/Used: **Used**
Hud Data Plate #: **ORE 445142 & ORE 445143**

[Signature] 8/15/08
- BORROWER - BRADEN D. COX - DATE -

Christina A. Cox 8.15.08
- BORROWER - CHRISTINA A. COX - DATE -

State of Washington
County of Skamania

On this the 15 day of August 2008, before me personally appeared

Braden D. Cox & Christina A. Cox

known to me to be the person(s) whose name(s) is/are subscribed to the foregoing instrument and acknowledged that he/she/they voluntarily executed the same for the purposes therein contained.

In Witness Whereof, I hereunto set my hand and Official Seal.

(Seal)

[Signature]
Notary Public
Julie Andersen
Printed Name
My commission expires: 6/17/2010

