

A240-10
R240-04

LIMITED POWER OF ATTORNEY (With Durable Provision)

NOTICE: THIS IS AN IMPORTANT DOCUMENT. BEFORE SIGNING THIS DOCUMENT, YOU SHOULD KNOW THESE IMPORTANT FACTS. THE PURPOSE OF THIS POWER OF ATTORNEY IS TO GIVE THE PERSON WHOM YOU DESIGNATE (YOUR "AGENT") BROAD POWERS TO HANDLE YOUR PROPERTY, WHICH MAY INCLUDE POWERS TO PLEDGE, SELL OR OTHERWISE DISPOSE OF ANY REAL OR PERSONAL PROPERTY WITHOUT ADVANCE NOTICE TO YOU OR APPROVAL BY YOU. YOU MAY SPECIFY THAT THESE POWERS WILL EXIST EVEN AFTER YOU BECOME DISABLED, INCAPACITATED OR INCOMPETENT. THIS DOCUMENT DOES NOT AUTHORIZE ANYONE TO MAKE MEDICAL OR OTHER HEALTH CARE DECISIONS FOR YOU. IF THERE IS ANYTHING ABOUT THIS FORM THAT YOU DO NOT UNDERSTAND, YOU SHOULD ASK A LAWYER TO EXPLAIN IT TO YOU. YOU MAY REVOKE THIS POWER OF ATTORNEY IF YOU LATER WISH TO DO SO.

TO ALL PERSONS, be it known, that I, Aimee L. Ebler of 2300 Shore View Way, Seattle, WA 98124 as Grantor, do hereby make and grant a limited and specific power of attorney to Richard Dale Ebler of 2300 Shore View Way, Seattle, WA 98124 and appoint and constitute said individual as my attorney-in-fact. My named attorney-in-fact shall have full power and authority to undertake, commit and perform only the following acts on my behalf to the same extent as if I had done so personally, all with full power of substitution and revocation in the presence: (Describe specific authority)

*Closing of house located at 10511 191st Lane
Calgary, AL.*

The authority granted shall include such incidental acts as are reasonably required or necessary to carry out and perform the specific authorities and duties stated or contemplated herein.

My attorney-in-fact agrees to accept this appointment subject to its terms, and agrees to act and perform in said fiduciary capacity consistent with my best interests as my attorney-in-fact deems advisable, and I thereupon ratify all acts so carried out.

I agree to reimburse my attorney-in-fact all reasonable costs and expenses incurred in the fulfillment of the duties and responsibilities enumerated herein.

Special durable provisions:

This power of attorney shall not be affected by subsequent incapacity of the Grantor. This power of attorney may be revoked by the Grantor giving written notice of revocation to the attorney-in-fact, provided that any party relying in good faith upon this power of attorney shall be protected unless and until said party has either a) actual or constructive notice of revocation, or b) upon recording of said revocation in the public records where the Grantor resides.

Other terms:



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Inst. # 2000-07185

03/07/2000-07185
09:59 AM CERTIFIED

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09:59 AM CERTIFIED

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09:59 AM CERTIFIED

Signed under seal this 21st day of February
Signed in the presence of:

Witness

Reid M. Weisser

Witness

Chris Jones

Witness

John D. Dunn

Witness

Emily McMichael

2000 (year)

Grantor

Attorney in Fact

State of Georgia

County of Gwinnett

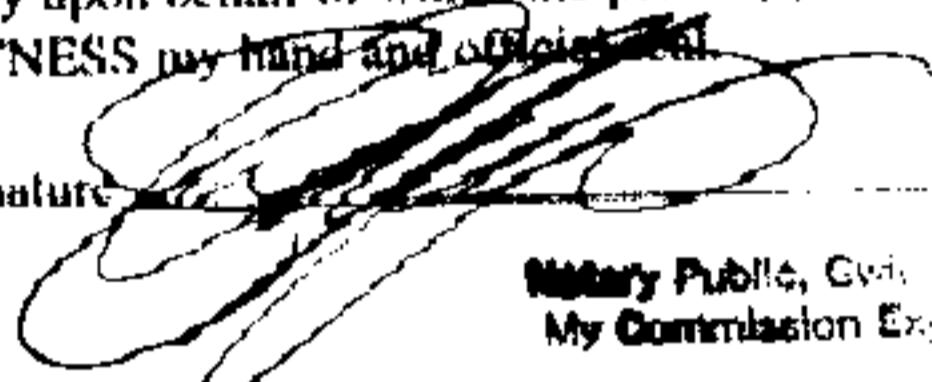
On February 21st, 2000 before me, Reid M. Weisser

appeared Aimee Elder

personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Signature



Notary Public, City, State
My Commission Expires Oct. 12, 2003

Affiant Known Produced ID

Type of ID GA Driver's License
(seal)

State of Georgia

County of Fulton

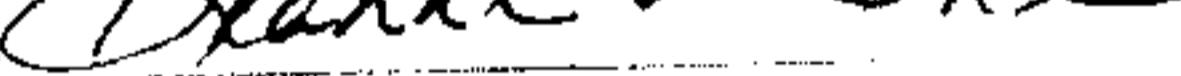
On February 22 before me, Darla Tice

appeared Aimee Elder

personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

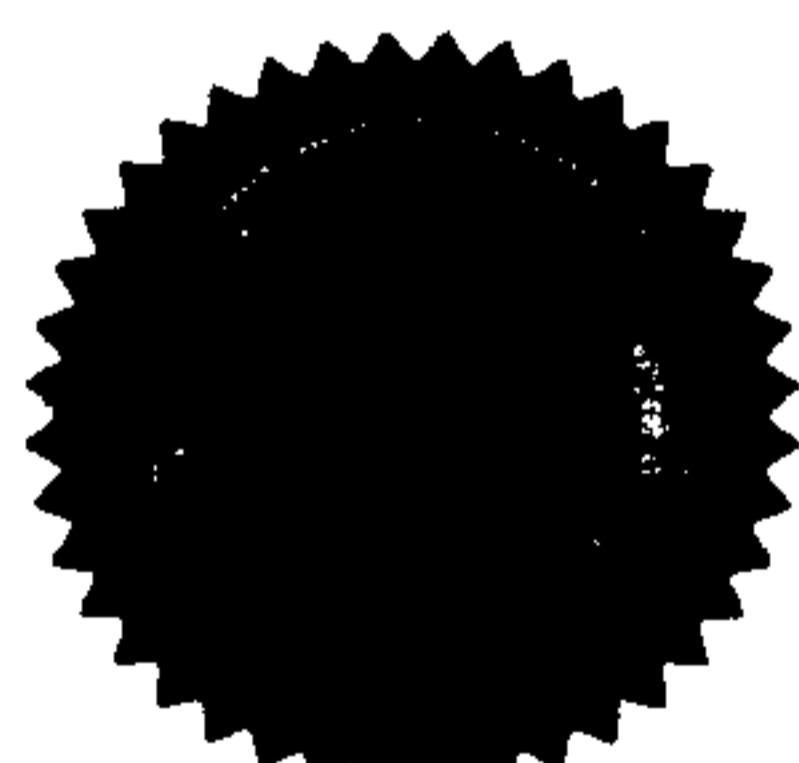
Signature



Notary Public, Fulton County, Georgia
My Commission Expires September 8, 2002

Affiant Known Produced ID

Type of ID Notary Public Seal



Inst # 2000-07185

03/07/2000-07185

09:59 AM CERTIFIED

SHELBY COUNTY JUDGE OF PROBATE

302 MHS 11.00