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MICHELLE UTSLER, COUNTY RECORDER MADISON !OWA



Power of Attorney - Short Form THE IOWA STATE BAR ASSOCIATION

THE IOWA STATE BAR ASSOCIATION Official Form No. 119 Recorder's Cover Sheet

Preparer Information: (Name, address and phone number)
Jerrold B. Oliver, P.O. Box 230, Winterset, IA 50273, Phone: (515) 462-3731

Taxpayer Information: (Name and complete address)

Gregory F. Gutoski 1739 Commerce Rd. Creston, IA 50801

Return Document To: (Name and complete address)

Jerrold B. Oliver PO BOX 230 Winterset, IA 50273

Grantors:

Lauren M. Gutoski

Grantees:

Gregory F. Gutoski

Legal description: See Page 2

Document or instrument number of previously recorded documents:



POWER OF ATTORNEY - SHORT FORM

The undersigned	
Lauren M. Gutoski	
ofCounty, lowa, does hereby make, constitute and appoint	
Gregory F. Gutoski	
ofCounty, lowa, the undersigned's true and lawful Attorney-in-Fact, with full right, power and authority to act for the undersigned and in the undersigned's name, place and stead with respect to the following:	
To sign all necessary documents in connection with the purchase of the following described real estate:	
Lot Ten (10) of Corkrean's Second Addition, an Addition to the City of Winterset, Madison County, lowa, located at 109 N 12th Ave., Winterset, IA 50273.	
Also to sign any and all necessary documents in order to obtain a mortgage loan from ABN AMRO Mortgage Group, Inc., to enable Gregory F. Gutoski and Lauren M. Gutoski to purchase said real estate. The amount of said mortgage loan is in the amount of \$149,600.00, and the closing of said sale and the obtaining of said mortgage is on or about February 16, 2006.	
Giving and Granting unto said Attorney-in-Fact the full power and authority to do and perform each and every act, deed, matter and thing whatsoever required and necessary to be done in and about the foregoing, as fully as the undersigned might or could do if personally present and acting.	
MANANA MA	

The undersigned further directs that this Power of Attorney shall take effect immediately and shall be irrevocable unless and until such time as there is filed of record a duly acknowledged revocation of this instrument in the same office in which the instrument containing this power is recorded. This Power of Attorney shall not be affected by my disability.

The undersigned does hereby authorize said Attorney-in-Fact to relinquish all rights of dower, homestead and distributive share in and to any real estate described herein in which the undersigned has an interest.

Words and phrases herein, including acknowled number, and as masculine or feminine gender, acco	dgment hereof, shall be construed as in the singular or plural problem.
Dated: <u>JW. 104A</u> , 2006	X Mauren M. gutasko.
	Lauren M. Gutoski
Wisconsin STATE OF 10W A, COUNTY OF <u>Rock</u>	
This instrument was acknowledged before me on	2 - 10 - 2006 , by <u>Lauren M. Gutoski</u>
	David J. C. Pet cell-Pollery Russic
	ma commission medicies 41 5 37 3000

Caution: Use only for limited powers. For comprehensive powers, use ISBA form #120 - General Power of Attorney.