

Document 2006 3848

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MICHELLE UTSLER, COUNTY RECORDER
MADISON IOWA

COMPUTER	<input checked="" type="checkbox"/>
RECORDED	<input checked="" type="checkbox"/>
C.O. PAR.D.	<input type="checkbox"/>



Power of Attorney - Short Form

THE IOWA STATE BAR ASSOCIATION

Official Form No. 119

Recorder's Cover Sheet

Preparer Information: (Name, address and phone number)

Mark L. Smith, Post Office Box 230, Winterset, IA 50273, Phone: (515) 462-3731

Taxpayer Information: (Name and complete address)

Cori Worrall, 408 East Benton, Winterset, IA 50273

Return Document To: (Name and complete address)

Mark L. Smith, Post Office Box 230, Winterset, IA 50273, Phone: (515) 462-3731

Grantors:

Cori Worrall

Grantees:

B. Marlene Worrall

Legal description: See Page 2

Document or instrument number of previously recorded documents:



POWER OF ATTORNEY - SHORT FORM

The undersigned
Cori Worrall

of MADISON County, Iowa, does hereby make, constitute and appoint

B. Marlene Worrall

of MADISON County, Iowa, 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 sell the residence owned by Cori Worrall at 408 East Benton, Winterset, Madison County, Iowa, legally described as:

Lot Three (3) in Block Five (5) of North Addition to the Town of Winterset, Madison County, Iowa

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.

In the event my Attorney-in-Fact is unable to serve for any reason or if my Attorney-in-Fact is currently my spouse and we become legally separated or our marriage is dissolved, I name B. Marlene Worrall of _____, as successor to my Attorney-in-Fact.

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 acknowledgment hereof, shall be construed as in the singular or plural number, and as masculine or feminine gender, according to the context.

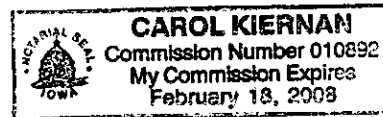
Dated: September 18, 2006 Cori Worrall

Cori Worrall

STATE OF IOWA, COUNTY OF MADISON

This instrument was acknowledged before me on September 18, 2006, by Cori Worrall

Carol Kiernan
Notary Public



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