



Document 2015 2644

Book 2015 Page 2644 Type 06 008 Pages 2
Date 9/09/2015 Time 12:00:36PM
Rec Amt \$12.00

✓ INDX
ANNO
SCAN
CHEK

LISA SMITH, COUNTY RECORDER
MADISON COUNTY IOWA



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, POB 230, Winterset, IA 50273, Phone: (515) 462-3731

Taxpayer Information: (Name and complete address)

Hal James Yeager & Tamra Jae McKinley-Yeager, 2048 Burr Oak Dr., Winterset, IA 50273

Return Document To: (Name and complete address)

✓ Union State Bank, Attn: Duane Gordon, POB 110, Winterset, IA 50273

Grantors:

Hal James Yeager

Grantees:

Tamra Jae McKinley-Yeager

Legal description: See Page 2

Document or instrument number of previously recorded documents:



POWER OF ATTORNEY SHORT FORM

The undersigned Hal James Yeager
of MADISON County, Iowa, does hereby make, constitute and appoint Tamra Jae McKinley-Yeager 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 sign any and all documents associated with the purchase of the following-described real estate: Parcel "A" located in SW 1/4 NE 1/4, and in NW 1/4 of SE 1/4 of Section 29, Township 76 North, Range 29 W of the 5th PM., Madison County, Iowa, containing 4.000 acres as shown in Plat of Survey filed in Book 2015, Page 2464 on August 26, 2015, in the Office of the Recorder of 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.

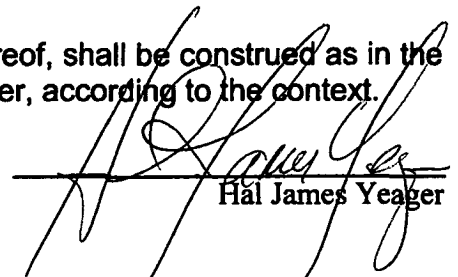
In the event my Attorney-in-Fact is unable to serve for any reason or if my Attorney-in-Fact is currently my spouse and we become legally separated or our marriage is dissolved, I name N/A of _____ as successor to my Attorney-in-Fact.

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: 9/9/2015


Hal James Yeager

STATE OF IOWA, COUNTY OF MADISON

This record was acknowledge before me this 9th day of September, 2015, by Hal James Yeager




Signature of Notary Public

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