

BK: 2016 PG: 3415
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Fee Amount: \$12.00
Revenue Tax:
LISA SMITH 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)

Diana L. Rolands, PO Box 472, Osceola, IA 50213, Phone: (641) 342-4727

Taxpayer Information: (Name and complete address)

Mary Ann Oberender, 28925 306th Street, Lot 59, Booneville, IA 50038

Return Document To: (Name and complete address)

Mary Ann Oberender, 28925 306th Street, Lot 59, Booneville, IA 50038

Grantors:

Donna Jean Oberender

Grantees:

Mary Ann Oberender

Legal description: See Page 2

Document or instrument number of previously recorded documents:



POWER OF ATTORNEY SHORT FORM

The undersigned Donna Jean Oberender
of Clarke County, Iowa, does hereby make, constitute and appoint Mary Ann Oberender
of Dallas 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:

Lot Five (5) and the West 60 feet of Lot Ten (10) of Depot 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
_____ 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.

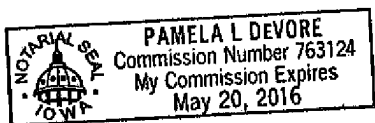
Words and phrases herein, including acknowledgment hereof, shall be construed as in the
singular or plural number, and as masculine or feminine gender, according to the context.

Dated on March 9, 2016

Donna Jean Oberender
Donna Jean Oberender

STATE OF IOWA, COUNTY OF CLARKE

This record was acknowledged before me on March 9, 2016, by Donna Jean Oberender



Pamela L Devore
Signature of Notary Public

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