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LISA SMITH, COUNTY RECORDER MADISON COUNTY IOWA

CHEK

## **POWER OF ATTORNEY - SHORT FORM**

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

LSB30338

Preparer Information: Matthew M. Hurn, 4201 Westown Pkwy, West Des Moines, IA 50265,

Phone: (515) 283-1801

Taxpayer Information: Georg Schroeder, 5398 Russell Ave, NW Apt 511, Seattle, WA 98107

Return Document To: Georg Schroeder, 5398 Russell Ave, NW Apt 511, Seattle, WA 98107

**Grantors:** 

Georg F. Schroeder

Grantees:

Linda K. Schroeder

Legal Description: See Page 2

Document or instrument number of previously recorded documents:

The undersigned, Georg F. Schroeder, of  $\underline{King}$  County,  $\underline{WA}$ , does hereby make, constitute and appoint Linda K. Schroeder of  $\underline{Polk}$  County,  $\underline{TA}$ , 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, execute, and in any other manner complete the Note, Mortgage, settlement statements, federally mandated disclosures, name or identity affidavits, occupancy affidavits, required affirmations and disclosures and any and all documents required by Luana Savings Bank to facilitate the mortgage loan and purchase closing for property legally known as:

see attached Exhibit A.

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 n/a as successor to my Attorney-in-Fact.

The undersigned further directs that this Power of Attorney shall take effect immediately and all rights, powers and authority contained herein shall not continue beyond six (6) months from the date hereof. 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: 11/1/2016	Many M
	Georg F. Schroeder
STATE OF, COUNTY OF This instrument was acknowledged before me Schroeder.  STINSON STINSON NOTARY PUBLIC STINSON PUBLIC	King on 11/01/2016, by Georg F.  Jahn American, Notary Public