## MTC 8244D-SH RECORDING COVER SHEET

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05/29/2008 03:33:10 PM

2008-007853

Klamath County, Oregon

Fee: \$31.00

**After Recording Return To:** 

Karston Collins 7347-B Tennessee Ave. Fairchild AFB, WA 99011

1. Name(s) of the Transaction(s):

**POWER OF ATTORNEY** 

2. Direct Party (Grantor):

SGT. COLLINS, KARSTON T.

3. Indirect Party (Grantee):

**SARAH L. COLLINS** 

4. True and Actual Consideration Paid:

N/A

5. Legal Description:

N/A

TMAIC

## GENERAL POWER OF ATTORNEY

This is a MILITARY POWER OF ATTORNEY prepared pursuant to Title 10, United States Code, Section 1044b and executed by a person authorized to receive legal assistance from the military service. Federal law exempts this power of attorney from any requirement of form, substance, formality, or recording that is prescribed for powers of attorney under the laws of a state, the District of Columbia, or a territory, commonwealth, or possession of the United States. Federal law specifies that this power of attorney shall be given the same legal effect as a power of attorney prepared and executed in accordance with the laws of the jurisdiction where it is presented.

KNOW	ΔT.T.	PERSONS	BY	THESE	PRESENTS:
101011	ALL	EMMOUND			TILDILITIES.

	That I,	SGT	Collins, Ka	instan 1	•	, do hereby	constitut	e
and	appoint	Sarah	L. Collins		•	, current	ly residin	g
in _	Spokanc	, Wash:	ngton	_(City/State	), as my t	true and lawfu	l attorney	٠_
	v	•	9			ll matters in		
in m	y behalf.	Such act	s shall includ	de:				

- 1. To lease, sell, use, establish title to, register, insure, transfer, mortgage, maintain, manage, pledge, exchange or otherwise dispose of or encumber any and all of my property, real, personal, or mixed, including motor vehicles of any kind, and to execute and deliver good and sufficient deeds or other instruments for the lease, conveyance, mortgage, maintenance, or transfer of the same.
- 2. To buy, receive, lease, accept or otherwise acquire in my name and for my account, property, real, personal or mixed upon such terms, considerations and conditions as my said attorney-in-fact shall deem appropriate.
- 3. To transact all business of mine on my behalf including entering into contracts and the making of such investments as my attorney shall deem sound.
- 4. To institute and prosecute, or to appear and defend, any claims or litigation involving me or my interests. This shall include, but not be limited to, the authority to present a claim against the United States for damage to or loss of personal property.
- 5. To prepare, execute, and file all tax returns and to receive and negotiate all tax refund checks.
- To execute all documents needed for travel of my family members and transportation or storage of my property, as authorized by law and Military regulations; to sign for and clear government or other quarters in the best interests of my family members and in accordance with law and Military regulations.
- 7. To demand, act to recover, and receive, all sums of money which are now or will become owing or belonging to me, and to institute accounts on my behalf and to deposit, draw upon or expend such funds of mine as are necessary in furtherance of the powers granted herein. This shall include, but not be limited to, the authority to receive, endorse, cash, or deposit negotiable instruments made payable to me and drawn upon the greaturer, or other fiscal officer or depository, of the United dre States.

The above described powers are merely examples of the authority granted by this document and not in limitation or definition thereof. However, my Agent shall have no rights or powers hereunder with respect to the following:

- a. Life Insurance: My Attorney shall have no rights or powers hereunder to cancel or change the beneficiary of any policy of life insurance owned by me.
- b. Fiduciary Powers: My Attorney shall have no rights or powers hereunder with respect to any act, power, duty, right or obligation, relating to any person, matter, transaction or property, owned by me or in my custody as a trustee, custodian, personal representative or other fiduciary capacity for someone else.

I RATIFY ALL THAT MY ATTORNEY SHALL LAWFULLY DO OR CAUSE TO BE DONE BY THIS DOCUMENT.

IN WITNESS WHEREOF, I hereunto set my hand and seal on 20 February 208

BAST CARD

STATE OF WASHINGTON COUNTY OF PIERCE

I, the undersigned, certify that I am a duly commissioned, qualified, and authorized notary public. Before me personally, within the territorial limits of my warrant of authority, appeared the above named grantor, who is known to me to be the person who is described herein, whose name is subscribed to, and who signed this Power of Attorney as Grantor, and who acknowledged that this instrument was executed as a free and voluntary act and deed for the uses and purposes herein set forth.

20 Feb 08 GIVEN UNDER MY HAND AND OFFICIAL SEAL on STATE OF WASHINGTON WITH THE ARMED FORCES OF THE UNITED STATES) AT FORT LEWIS, WASHINGTON COUNTY OF PIERCE jalt-15. DL SIGN) Notary Public in and for the PRINT State of Washington ANK/COMPONENT My Commission Expires: Brenda L. Gatton My Commission Expires \*\*\*This acknowledgment is executed in my official 11-24-2008 State of Washington capacity under the authority granted by Title 10, United States Code, Section 1044a, which also states **Notary Public** that no seal is required.