

RECORDED BY  
**Stewart Title of Douglas County**  
IN OFFICIAL RECORDS OF  
DOUGLAS CO., NEVADA

2004 AUG 31 PM 3:02

WERNER CHRISTEN  
RECORDER

\$ 17.00 PAID 32 DEPUTY

APN 1420-35-310-028

Recording Requested By:

**Stewart Title of Douglas County**

1663 US Highway 395 N., Ste. 101

Minden, NV 89423

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**POWER OF ATTORNEY**

(Title of Document)

This page added to provide additional information required by NRS 111.312 Sections 1-2.  
(Additional recording fee applies)

This cover page must be typed.

0623104

BK0804 PG13935

RECORDING REQUESTED BY  
Financial Title Company  
AND WHEN RECORDED MAIL TO

Name Mr. and Mrs. Warren J.E. Talbot  
Street Address 1694 Provincetown Drive  
City, State Zip San Jose, CA 95129  
Order No. 41117181-278-DBP

DOCUMENT: 17700030



Pages: 2

Fees... 10.00  
Taxes...  
Copies...  
AMT PAID 10.00

BRENDA DAVIS  
SANTA CLARA COUNTY RECORDER  
Recorded at the request of  
Financial Title Company

RDE # 002  
4/06/2004  
8:00 AM

SPACE ABOVE THIS LINE FOR RECORDER'S USE

**UNIFORM STATUTORY FORM POWER OF ATTORNEY**  
(California Probate Code Section 4401)

NOTICE: THE POWERS GRANTED BY THIS DOCUMENT ARE BROAD AND SWEEPING. THEY ARE EXPLAINED IN THE UNIFORM STATUTORY FORM POWER OF ATTORNEY ACT (CALIFORNIA CIVIL CODE SECTIONS 2475-2499.5, INCLUSIVE). IF YOU HAVE ANY QUESTIONS ABOUT THESE POWERS, OBTAIN COMPETENT LEGAL ADVICE. THIS DOCUMENT DOES NOT AUTHORIZE ANYONE TO MAKE MEDICAL AND OTHER HEALTH-CARE DECISIONS FOR YOU. YOU MAY REVOKE THIS POWER OF ATTORNEY IF YOU LATER WISH TO DO SO.

I, Marion I. Talbot  
appoint Warren J.E. Talbot  
as my agent (attorney-in-fact) to act for me in any lawful way with respect to the following subjects indicated by signature:

TO GRANT ALL OF THE FOLLOWING POWERS, SIGN THE LINE IN FRONT OF (N) AND IGNORE THE LINES IN FRONT OF THE OTHER POWERS.

TO GRANT ONE OR MORE, BUT FEWER THAN ALL, OF THE FOLLOWING POWERS, SIGN THE LINE IN FRONT OF EACH POWER YOU ARE GRANTING.

TO WITHHOLD A POWER, DO NOT SIGN THE LINE IN FRONT OF IT. YOU MAY, BUT NEED NOT, CROSS OUT EACH POWER WITHHELD.

SIGN

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- (A) Real property transactions.
- (B) Tangible personal property transactions.
- (C) Stock and bond transactions.
- (D) Commodity and option transactions.
- (E) Banking and other financial institution transactions.
- (F) Business operating transactions.
- (G) Insurance and annuity transactions.
- (H) Estate, trust, and other beneficiary transactions.
- (I) Claims and litigation.
- (J) Personal and family maintenance.
- (K) Benefits from social security, medicare, medicaid, or other governmental programs, or civil or military service.
- (L) Retirement plan transactions.
- (M) Tax matters.
- (N) ALL THE POWERS LISTED ABOVE.

YOU NEED NOT SIGN ANY OTHER LINES IF YOU SIGN LINE (N).

**SPECIAL INSTRUCTIONS**

ON THE FOLLOWING LINES YOU MAY GIVE SPECIAL INSTRUCTIONS LIMITING OR EXTENDING THE POWERS GRANTED TO YOUR AGENT.

\_\_\_\_\_  
\_\_\_\_\_

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UNLESS YOU DIRECT OTHERWISE ABOVE, THIS POWER OF ATTORNEY IS EFFECTIVE IMMEDIATELY AND WILL CONTINUE UNTIL IT IS REVOKED.

This power of attorney will continue to be effective even though I become incapacitated.

STRIKE THE PRECEDING SENTENCE IF YOU DO NOT WANT THIS POWER OF ATTORNEY TO CONTINUE IF YOU BECOME INCAPACITATED.

EXERCISE OF POWER OF ATTORNEY WHERE MORE THAN ONE AGENT DESIGNATED

If I have designated more than one agent, the agents are to act \_\_\_\_\_

IF YOU APPOINTED MORE THAN ONE AGENT AND YOU WANT EACH AGENT TO BE ABLE TO ACT ALONE WITHOUT THE OTHER AGENT JOINING, WRITE THE WORD "SEPARATELY" IN THE BLANK SPACE ABOVE. IF YOU DO NOT INSERT ANY WORD IN THE BLANK SPACE, OR IF YOU INSERT THE WORD "JOINTLY", THEN ALL OF YOUR AGENTS MUST ACT OR SIGN TOGETHER.

I agree that any third party who receives a copy of this document may act under it. Revocation of the power of attorney is not effective until a third party has actual knowledge of the revocation. I agree to indemnify the third party for any claims that arise against the third party because of reliance on this power attorney.

Signed this 2nd day of April, 2004

Signature of Marion I. Talbot

BY ACCEPTING OR ACTING UNDER THE APPOINTMENT, THE AGENT ASSUMES THE FIDUCIARY AND OTHER LEGAL RESPONSIBILITIES OF AN AGENT.

CERTIFICATE OF ACKNOWLEDGMENT OF NOTARY PUBLIC

STATE OF CALIFORNIA COUNTY OF Santa Clara §s.

On 4/2/04 before me,

Denise B. Perrucci

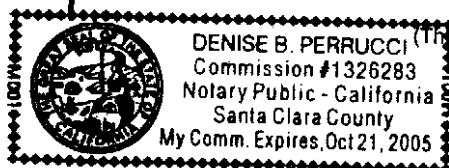
a Notary Public in and for said County and State, personally appeared

Marion I. Talbot

personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies) and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s), acted, executed the instrument.

WITNESS my hand and official seal.

Signature Denise B. Perrucci



(This area for official notarial seal)

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Order No.: 040301618

### LEGAL DESCRIPTION

The land referred to herein is situated in the State of Nevada,  
County of DOUGLAS, described as follows:

Lot 59 in Block E as set forth on the Final Subdivision Map  
FSM #94-04-01 for SKYLINE RANCH PHASE I filed for record  
with the Douglas County Recorder on May 11, 2001 in Book  
0501, of Official Records, Page 3298 as Document No. 514006.

APN 1420-35-310-028

