

APN 1319-19.310.007

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OFFICIAL RECORD

Requested By:
First American Title Mindel
Douglas County - NV
Karen Ellison - Recorder
Page: 1 of 5 Fee: \$18.00
BK-912 PG-2239 RPTT: 0.00



FOR RECORDER'S USE ONLY

TITLE OF DOCUMENT: Power of Attorney

WHEN RECORDED MAIL TO:

Patrick R. Baldauff and Joyce Blanchard

215 Aikapa Street

Kailua, HI 96734



SPECIAL POWER OF ATTORNEY

THIS IS A MILITARY POWER OF ATTORNEY PREPARED PURSUANT TO TITLE 10, UNITED STATES CODE, SECTION 1044A, AND EXECUTED BY A PERSON AUTHORIZED TO RECEIVE LEGAL ASSISTANCE FROM THE MILITARY SERVICES. FEDERAL LAW EXEMPTS THIS POWER OF ATTORNEY FROM ANY REQUIREMENT OF FORM, SUBSTANCE, FORMALITY, OR RECORDING THAT IS PRESCRIBED FOR POWERS OF ATTORNEY BY 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 ALL PERSONS BY THESE PRESENTS:

That I, Joyce Ruth Blanchard, residing in the State of Hawaii, do hereby appoint Patrick Ryan Baldauff as my agent (attorney-in-fact) to act for me in any lawful way with respect to the following SIGNED subjects:

**TO GRANT ONE OR MORE 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.**

TO TAKE POSSESSION OF MY HOUSEHOLD GOODS AND SHIP THEM TO A DIFFERENT

LOCATION: To take possession and order the removal and shipment of my household goods, personal baggage, or other personal property and cause it to be shipped to any warehouse, depot, dock, or other place of storage or safekeeping, government or private, directed by orders of appropriate U.S. Government transportation officials, and to execute and deliver all necessary forms, papers, certificates and receipts to carry out the foregoing.

TO ACCEPT DELIVERY OF MY HOUSEHOLD GOODS: To accept delivery of, receipt for, and/or clear through customs, my household goods and/or unaccompanied baggage, and to sign any and all documents, release, voucher, receipt, shipping ticket or other instrument necessary or convenient for such purpose.

TO ACCEPT MILITARY QUARTERS ON MY BEHALF: To accept military quarters assigned to me or my family members at any military installation; to sign for me and take possession of such quarters in my name; and sign for and take possession of any furniture, appliances, and equipment that may be authorized for use in or with such quarters as I may be assigned; to execute all necessary documents, instruments or papers and perform all acts necessary to carry out the foregoing.

TO TERMINATE MILITARY QUARTERS ON MY BEHALF: To effect the termination of U.S. Government quarters assigned to me or my family members, to procure or return any and all U.S. government property used in or for such quarters; and to sign any and all documents and do all acts necessary and proper to terminate my responsibility for such quarters.

TO PREPARE AND FILE MY FEDERAL AND STATE INCOME TAXES: To prepare, execute, sign and file my Federal and State tax returns for the State of _____ for the tax year 20____.

TO PERFORM BANKING TRANSACTIONS ON MY BEHALF: To draft checks and other negotiable instruments in my name and to otherwise withdraw from and/or deposit into my account number(s) _____ with _____ (name of bank or



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financial institution); to endorse, cash and receive the proceeds of any check or other negotiable instrument, which is, made payable to me.

TO HANDLE ANY LAWSUIT OR OTHER LEGAL ACTION THAT I MAY HAVE AN INTEREST

IN: To institute and prosecute, or to appear and defend, any claims or litigation involving me or my interest; and; to demand, act to recover, and receive all sums of money and all other things which are now or will become owing or belonging to me as a result of such claims, and to institute accounts on my behalf and to deposit, draw upon or expend such funds of mine as are necessary in furtherance of powers granted herein.

TO SELL MY REAL ESTATE ON MY BEHALF:

To bargain, sell, assign, and convey, using the standard of a reasonable seller under no compulsion to sell and engaging in an arms-length bargaining transaction, to any person of my attorney's choice, all my right, title and interest in _____ (address of property), and to convey by deed or general warranty with the customary covenants; to receive, on my behalf, payment of the purchase money for the real property described above in any manner that my attorney shall deem wise; to transmit these moneys to me, and to sign, seal, execute and deliver any and all deeds, contracts, or other documents necessary to carry out the foregoing.

TO PURCHASE REAL ESTATE IN MY NAME:

To purchase in my name and for my use the below-described real property in the City of Stateline, County of Douglas, State of Nevada described on the deed as **Lot 8, in Block 1, of Kingsbury Estates Unit No. 1, according to the map thereof, filed in the office of the county recorder of Douglas County, State of Nevada, on September 26, 1960, in Book 1 of Maps, as Document No. 16645. Assessor Parcel Number 1319-19-310-007. (Property also known as 658 Jeff Lane, Stateline, Nevada)**(address of property) and for that purpose to make, indorse, accept, receive, sign, seal, execute, acknowledge, and deliver any application forms, documents, instruments, or paper necessary or convenient to enter into both a contract and mortgage or deed of trust upon said real estate for such price, at such rate of interest, and upon such terms as my agent shall deem best.

TO USE, OPERATE, AND REGISTER MY MOTOR VEHICLE(S).

To use, operate, insure, title, license, and register, in my name, with any state or governmental agency any and all vehicles of which I am or may become the registered or legal owner.

TO SELL MY MOTOR VEHICLE:

To sell my motor vehicle upon such terms, considerations and conditions as my agent shall think proper. Further, to execute and deliver to the proper persons and authority all documents, instruments, and papers necessary to effect the sale and transfer of registration and license of the said vehicle. To take possession of, operate, and maintain this automobile and to execute and deliver all necessary forms, papers, statements of ownership, and receipt to carry out the foregoing.

TO PURCHASE MOTOR VEHICLES IN MY NAME:

To purchase motor vehicles in my name and upon such terms, considerations and conditions as my agent shall think proper. Further, to execute and deliver to the proper persons and authority all documents, instruments, and papers necessary to register and license such motor vehicles. To further execute any documents necessary to have repairs my agent deems necessary made on this automobile before I am able to take possession of the automobile. To take possession of, operate, and maintain this automobile and to execute and deliver all necessary forms, papers, statements of ownership, and receipt to carry out the foregoing.

TO SHIP MY VEHICLE:

To take possession of my vehicle, for the purpose of its removal and shipment from wherever it may be located, and to execute any release, voucher, receipt or any other instrument necessary or convenient for such purpose



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and to execute and deliver to the proper persons and authority, any and all documents, instruments and papers necessary to effect proper registration, insurance and license, in my name, of such automobile.

TO TAKE POSSESSION OF MY VEHICLE AFTER SHIPMENT: To take possession of my vehicle, after shipment and delivery to any port, warehouse, depot, dock, or other place of storage or safekeeping, government or private; to execute and deliver any release, voucher, receipt, shipping ticket, certificate or other instrument necessary or convenient for such purpose and to execute and deliver to the proper persons and authority, any and all documents, instruments and papers necessary to register, insure and license, such vehicle in my name, and to transport the vehicle to me or any location which I direct in writing.

TO TERMINATE MY RESIDENTIAL LEASE: To execute any and all documents and do all other things necessary or convenient to terminate any and all leases or rental agreements in my name.

TO LEASE MY HOUSE/APARTMENT TO OTHERS AND ACT AS MY LANDLORD/PROPERTY MANAGER: To manage, control, lease, sublease, and otherwise act concerning my interest in my residential property; to collect and receive rents or income there from; pay taxes, charges and assessments on the same; repair, maintain, protect, preserve, alter and improve the same; commit my resources and contract on my behalf regarding the same; and to do all things necessary or expedient to be done in my agent's judgment in connection with the property.

MISCELLANEOUS: To do the following on my behalf:

I HEREBY GIVE AND GRANT UNTO MY ATTORNEY-IN-FACT FULL POWER AND AUTHORITY TO DO AND PERFORM EACH AND EVERY ACT AND MATTER CONCERNING THE SUBJECT OF THIS DOCUMENT AS FULLY AND EFFECTUALLY TO ALL INTENTS AND PURPOSES AS I COULD DO LEGALLY IF I WERE PRESENT.

I HEREBY AUTHORIZE MY ATTORNEY-IN-FACT TO INDEMNIFY AND HOLD HARMLESS ANY THIRD PARTY WHO ACCEPTS AND ACTS UNDER OR IN ACCORDANCE WITH THIS POWER OF ATTORNEY.

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

I intend for this to be a DURABLE Power of Attorney. This Power of Attorney will continue to be effective if I become disabled, incapacitated, or incompetent. All acts done by my Attorney-in-Fact hereunder shall have the same effect and inure to the benefit of and bind myself and my heirs as if I were competent, and not disabled, incapacitated, or incompetent.

I shall be considered disabled or incapacitated for purposes of this Power of Attorney if a physician, based on that physician's examination, certifies in writing at a date subsequent to the date which this Power of Attorney is executed, that I am disabled from or incapable of exercising control over my person, property, personal affairs, or financial affairs. I authorize the physician who so certifies, to disclose my physical or mental condition to another person for purposes of this Power of Attorney. A third party who accepts this Power of Attorney, endorsed by proper physician certification of my disability or incapacity, is held harmless and fully protected from any action taken under this Power of Attorney. This Power of Attorney shall become effective when I sign and execute it below. Unless sooner revoked or terminated by me, this Power of Attorney shall become NULL and VOID on **October 1st, 2012.**

Notwithstanding my inclusion of a specific expiration date herein, if on the above-specified expiration date, or during the sixty (60) day period preceding that specified expiration date, I should be or have been determined by the United States Government to be in a military status of "missing," "missing in action," or "prisoner of war," or if I should be or have been properly certified, in writing, by a physician to be disabled from or incapable of exercising control over my person, property, personal affairs, or financial affairs, then this Power of



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Attorney shall remain valid and in full effect until sixty (60) days after I have returned to United States military control following termination of such status or sixty (60) days after I have recovered from such disability unless sooner revoked or terminated by me.

ALL BUSINESS TRANSACTED HEREUNDER FOR ME OR FOR MY ACCOUNT SHALL BE TRANSACTED IN MY NAME, AND ALL ENDORSEMENTS AND INSTRUMENTS EXECUTED BY MY ATTORNEY FOR THE PURPOSE OF CARRYING OUT THE FOREGOING POWERS SHALL CONTAIN MY NAME, FOLLOWED BY THAT OF MY ATTORNEY AND THE DESIGNATION "ATTORNEY-IN-FACT."

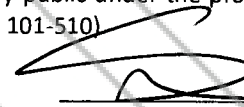
IN WITNESS WHEREOF, I sign, seal, declare, publish, make and constitute this as and for my Power of Attorney on 27 AUG 12.


GRANTOR Joyce Ruth Blanchard

ACKNOWLEDGEMENT BY A MILITARY NOTARY PURSUANT TO TITLE 10 U. S. C. 1044a

On this the 27 day of August, 2012, before the undersigned officer, personally appeared the above named GRANTOR, satisfactorily proven to be (a) serving in or retired from the Armed Forces of the United States, or (b) a lawful dependent of a person serving in or retired from the Armed Forces of the United States, or (c) a person serving with, employed by, or accompanying the Armed Forces of the United States outside the United States and outside the Canal Zone, Puerto Rico, Guam, and the Virgin Islands, and to be the person whose name is subscribed to the within instrument and acknowledged that he or she executed the same. And the undersigned does further certify that he or she is at the date of this certificate an officer of the Armed Forces of the United States having the general powers of a notary public under the provisions of Section 936 or 1044a of Title 10 of the United States Code (Public Law 90-632 and 101-510)

AUTHORIZED TO ACT AS A NOTARY PUBLIC UNDER THE PROVISIONS OF SECTION 1044a OF TITLE 10 OF THE UNITED STATES CODE. NO SEAL REQUIRED BY LAW.


Notary Public
Name: Steve Johnson
Title: ETC, SDO/DATT
Command: DAO Wellington NZ

OR ACKNOWLEDGEMENT BY A NOTARY PUBLIC

County of _____
State of _____

On _____ before me, _____, personally appeared _____
 Personally known to me - OR - proved to me on the basis of satisfactory evidence to be the person(s) whose names(s) is/are

_____ subscribed to the within instrument and acknowledgement to me that he/she/they executed the same his/her/their authorized capacity(ies), and that by his/her/their signatures(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.