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OFFICIAL RECORD

Requested By:
WFG Lender Services
Douglas County - NV
Karen Ellison - Recorder
Page: 1 of 11 Fee: \$24.00
BK-713 PG-4171 RPTT: 0.00



APN: 1318-15-612-014

This document was prepared by:
Margaret Ann Aikin
274 Cheyenne Way
Zephyr Cove, Nevada 89448

Return To:
Margaret Ann Aikin
274 Cheyenne Way
Zephyr Cove, Nevada 89448

RETURN TO:
WFG LENDER SERVICES
RECORDING DEPARTMENT
2625 TOWNSGATE ROAD SUITE 101
WESTLAKE VILLAGE, CA 91361

POWER OF ATTORNEY

OF

Margaret Ann Aikin

IMPORTANT INFORMATION FOR THE PRINCIPAL: THIS IS AN IMPORTANT LEGAL DOCUMENT. IT CREATES A POWER OF ATTORNEY. BEFORE EXECUTING THIS DOCUMENT, YOU SHOULD KNOW THESE IMPORTANT FACTS:

- 1) THIS DOCUMENT GIVES THE PERSON YOU DESIGNATE AS YOUR ATTORNEY-IN-FACT THE POWER TO MAKE DECISIONS CONCERNING YOUR PROPERTY FOR YOU. YOUR ATTORNEY-IN-FACT WILL BE ABLE TO MAKE DECISIONS AND ACT WITH RESPECT TO YOUR PROPERTY (INCLUDING YOUR MONEY) UNLESS YOU BECOME INCAPACITATED.

DOC#506913070



- 2) THIS POWER OF ATTORNEY DOES NOT AUTHORIZE THE ATTORNEY-IN-FACT TO MAKE HEALTH CARE DECISIONS FOR YOU.
- 3) THE PERSON YOU DESIGNATE IN THIS DOCUMENT HAS A DUTY TO ACT CONSISTENT WITH YOUR DESIRES AS STATED IN THIS DOCUMENT OR OTHERWISE MADE KNOWN OR, IF YOUR DESIRES ARE UNKNOWN, TO ACT IN YOUR BEST INTERESTS.
- 4) YOU SHOULD SELECT SOMEONE YOU TRUST TO SERVE AS YOUR ATTORNEY-IN-FACT. UNLESS YOU SPECIFY OTHERWISE, GENERALLY THE ATTORNEY-IN-FACT'S AUTHORITY WILL CONTINUE UNTIL YOU DIE OR REVOKE THE POWER OF ATTORNEY OR THE ATTORNEY-IN-FACT RESIGNS OR IS UNABLE TO ACT FOR YOU.
- 5) YOUR AGENT IS ENTITLED TO REASONABLE COMPENSATION UNLESS YOU STATE OTHERWISE.
- 6) IF YOUR ATTORNEY-IN-FACT IS UNABLE OR UNWILLING TO ACT FOR YOU, YOUR POWER OF ATTORNEY WILL END UNLESS YOU HAVE NAMED A SUCCESSOR ATTORNEY-IN-FACT. YOU MAY ALSO NAME A SECOND SUCCESSOR AGENT.
- 7) YOU HAVE THE RIGHT TO REVOKE THE AUTHORITY GRANTED TO THE PERSON DESIGNATED IN THIS DOCUMENT.
- 8) IF THERE IS ANYTHING IN THIS DOCUMENT THAT YOU DO NOT UNDERSTAND, YOU SHOULD ASK A LAWYER TO EXPLAIN IT TO YOU.



I. PRINCIPAL AND ATTORNEY-IN-FACT

I, Margaret Ann Aikin, who reside at 274 Cheyenne Way, Zephyr Cove, Nevada 89448, appoint the following person to serve as my attorney-in-fact, to act for me in any lawful way with respect to the subjects indicated below:

Joseph Wood Hayes
Zephyr Cove, Nevada

II. EFFECTIVE TIME

This power of attorney is effective immediately and will continue to be effective until my death or until I become disabled or incapacitated. My disability or incapacity will be determined by my physician (or a physician chosen by my attorney-in-fact if I do not have a physician or if my physician is unavailable) and set forth in a written certification.

Pursuant to the Health Insurance Portability and Accountability Act of 1996 ("HIPAA") and all other applicable state and federal laws, and exclusively for the purpose of making a determination of my incapacitation or incapability of managing my financial affairs and obtaining an affidavit of such incapacitation by a physician, I authorize any health care provider to disclose to the person named herein as my "attorney-in-fact" any pertinent individually identifiable health information sufficient to determine whether I am mentally or physically capable of managing my financial affairs. In exercising such authority, my attorney-in-fact constitutes my "personal representative" as defined by HIPAA.

III. POWERS OF ATTORNEY-IN-FACT

To the extent permitted by law, my attorney-in-fact may act in my name, place, and stead in any way that I myself could with respect to the following matters:

YOUR ATTORNEY-IN-FACT SHALL BE AUTHORIZED TO ENGAGE ONLY IN THOSE ACTIVITIES THAT ARE INITIALED.



(~~AAA~~)

REAL ESTATE TRANSACTIONS:

- Manage, sell, transfer, lease, mortgage, pledge, refinance, insure, maintain, improve, collect and receive rent, sale proceeds, and earnings, pay taxes, assessments, and charges, and perform any and all other acts with respect to real property and interests in real property that I own now or later acquire.
- Defend, settle, and enforce by litigation a claim to real property and interests in real property that I own now or later acquire.
- Buy, lease, or otherwise acquire real property or an interest in real property, including the authority to enter into listing agreements and purchase and sale contracts, and to sign escrow instructions.
- Execute deeds, mortgages, releases, satisfactions, and other instruments relating to real property and interests in real property that I own now or later acquire.
- Hire and discharge accountants, bookkeepers, property managers, and other professionals providing services related to real property and interests in real property that I now own or later acquire.
- Exercise all powers with respect to real property and interests in real property that I could if present and under no disability.

(~~AAA~~)

LEGAL ACTIONS:

To act for me in all legal matters, whether claims in my favor or against me, including but not limited to the authority to retain and discharge attorneys on my behalf; appear for me in all actions and proceedings, commence actions in my name, sign all documents, submit claims to arbitration or mediation, settle claims, and pay judgments and settlements; and exercise all powers with respect to legal actions that I could if present and under no disability.

My attorney-in-fact is empowered to take all further action, including the payment of expenditures and the preparation and execution of all documents, as my attorney-in-fact deems necessary or appropriate to fully effectuate the purposes of the foregoing matters.



(M&A) Notwithstanding the foregoing, the authority of my attorney-in-fact is limited as follows: This POA is for refinance traction for Joseph Hayes and Margaret aikin on their primary residence at 274 Cheyenne Way, Zephyr Cove, Nevada 89448 with LoanDepot.com, LLC loan number 100202489.

IV. GENERAL PROVISIONS

- 1) Reliance By Third Parties. I hereby agree that any third party receiving a duly executed copy of this document may rely on and act under it. Revocation or termination of this power of attorney will be ineffective as to a third party unless and until that third party receives actual notice or knowledge of the revocation or termination. For myself and for my heirs, executors, legal representatives, devisees, and assigns, I hereby agree to indemnify and hold harmless any third party from any and all claims because of good faith reliance on this instrument.
- 2) Severability. If any provision in this power of attorney is found to be invalid or unenforceable, this invalidity or unenforceability will not affect the other provisions of this document, and the other provisions will be given effect without the invalid or unenforceable provision.
- 3) Revocation. I may revoke this power of attorney at any time.
- 4) Maintenance of Records; Accounting. My attorney-in-fact must maintain records of all actions taken on my behalf, including transactions, receipts, disbursements and investment. My attorney-in-fact shall provide an accounting for all funds handled and all acts performed as my attorney-in-fact, but only upon my request, the request of a personal representative or a fiduciary acting on my behalf, or court order. Any requirement of my attorney-in-fact to file inventories and accounts with the county clerk or with the court is specifically waived.
- 5) Compensation and Reimbursement. My attorney-in-fact is entitled to reasonable compensation for services provided on my behalf pursuant to this power of attorney. My attorney-in-fact will be reimbursed for all reasonable expenses incurred relating to his or her responsibilities under this power of attorney.



- 6) No Personal Benefit. Except as specifically provided in this document, my attorney-in-fact may not personally benefit from any transaction engaged in or on my behalf, or use my assets to discharge any of his or her own legal obligations, excluding me and those I am legally obligated to support.
- 7) Liability of Attorney-in-Fact. All persons or entities that in good faith endeavor to carry out the provisions of this power of attorney will not be liable to me, my estate, or my heirs for any damages or claims arising because of their actions or inactions based on this power of attorney. My estate will indemnify and hold them harmless. A successor attorney-in-fact will not be liable for the acts of a prior attorney-in-fact.

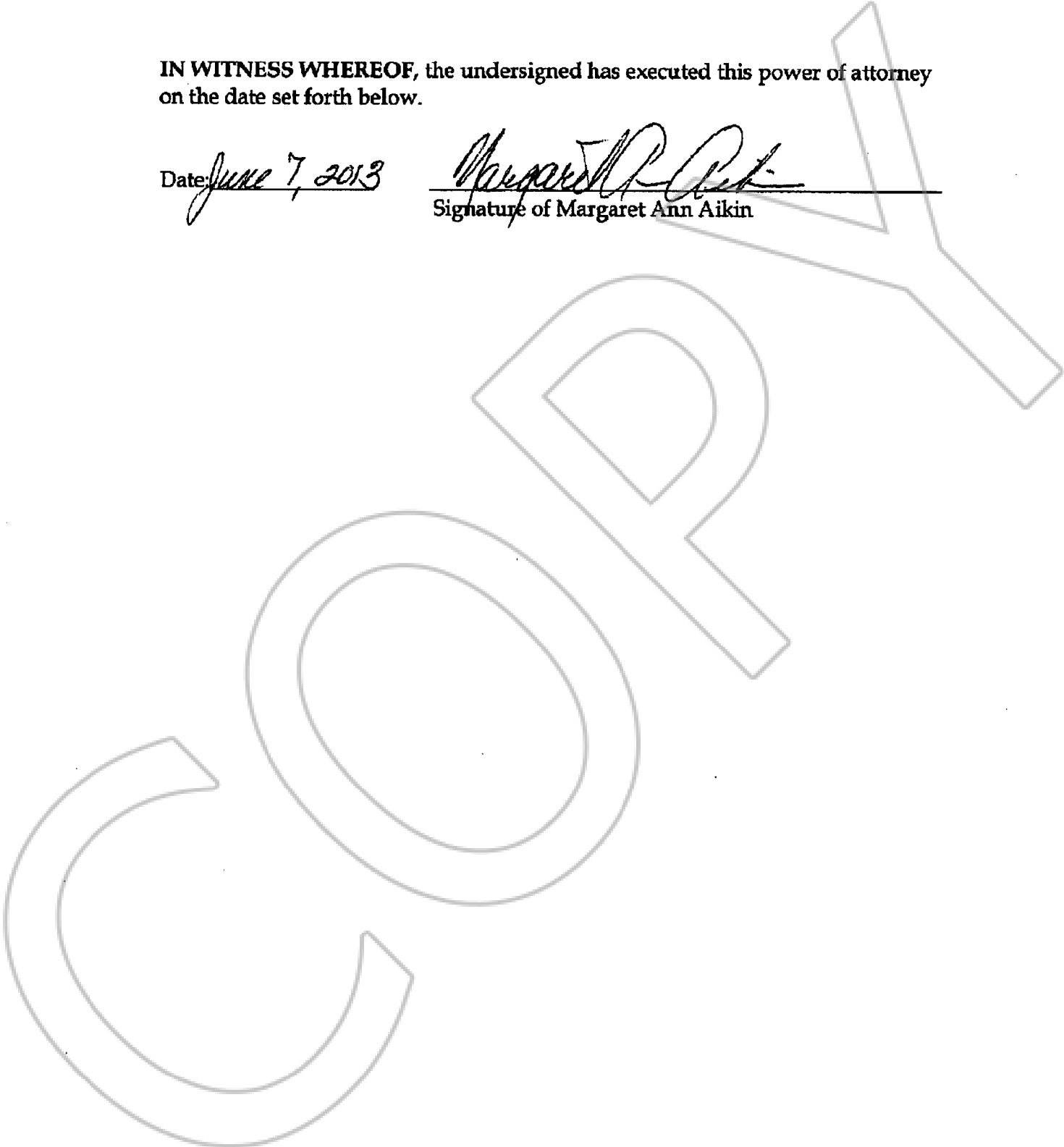


IN WITNESS WHEREOF, the undersigned has executed this power of attorney on the date set forth below.

Date: June 7, 2013



Signature of Margaret Ann Aikin





IMPORTANT INFORMATION FOR AGENT

1) **Agent's Duties.** When you accept the authority granted under this Power of Attorney, a special legal relationship is created between you and the principal. This relationship imposes upon you legal duties that continue until you resign or the Power of Attorney is terminated or revoked. You must:

- Do what you know the principal reasonably expects you to do with the principal's property or, if you do not know the principal's expectations, act in the principal's best interest;
- Act in good faith;
- Do nothing beyond the authority granted in this Power of Attorney; and
- Disclose your identity as an agent whenever you act for the principal by writing or printing the name of the principal and signing your own name as "agent" in the following manner:

(Principal's Name) by (Your Signature) as Agent

2) Unless the Special Instructions in this Power of Attorney state otherwise, you must also:

- Act loyally for the principal's benefit;
- Avoid conflicts that would impair your ability to act in the principal's best interest;
- Act with care, competence, and diligence;
- Keep a record of all receipts, disbursements and transactions made on behalf of the principal;
- Cooperate with any person that has authority to make health care decisions for the principal to do what you know the principal reasonably expects or, if you do not know the principal's expectations, to act in the principal's best interest; and



- Attempt to preserve the principal's estate plan if you know the plan and preserving the plan is consistent with the principal's best interest.
- 3) Termination of Agent's Authority. You must stop acting on behalf of the principal if you learn of any event that terminates this Power of Attorney or your authority under this Power of Attorney. Events that terminate a Power of Attorney or your authority to act under a Power of Attorney include:
- Death of the principal;
 - The principal's revocation of the Power of Attorney or your authority;
 - The occurrence of a termination event stated in the Power of Attorney;
 - The purpose of the Power of Attorney is fully accomplished; or
 - If you are married to the principal, your marriage is dissolved.
- 4) Liability of Agent. The meaning of the authority granted to you is defined in NRS 162A.200 to 162A.660, inclusive. If you violate NRS 162A.200 to 162A.660, inclusive, or act outside the authority granted in this Power of Attorney, you may be liable for any damages caused by your violation.
- 5) If there is anything about this document or your duties that you do not understand, you should seek legal advice.



**ACKNOWLEDGMENT
OF NOTARY PUBLIC**

State of Nevada

County of Douglas

On this 7 day of June, 2013, before me, the undersigned Notary Public, personally appeared Margaret Ann Aikin, personally known to me (or proved to me on the basis of satisfactory evidence) to be the individual who signed the foregoing power of attorney and acknowledged to me that he or she executed the same in his or her authorized capacity, and that by such signature, the person executed the instrument.

Witness my hand and seal.

Signature of Notary Public: 

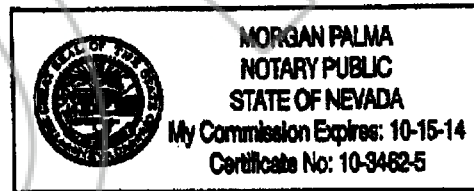




EXHIBIT "A"

ALL THAT CERTAIN PROPERTY LOCATED AND SITUATED IN THE COUNTY OF DOUGLAS, STATE OF NEVADA, SPECIFICALLY DESCRIBED AS FOLLOWS:

LOT 21 IN BLOCK A, AS SHOWN ON THE MAP OF ROUND HILL VILLAGE, UNIT NO. 2, FILED AUGUST 31, 1965 IN THE OFFICE OF THE COUNTY RECORDER OF DOUGLAS COUNTY, NEVADA AS DOCUMENT NO. 29312.

P.I.D#: 1318-15-612-016

