DOC # 844375 06/12/2014 02:19PM Deputy: AR OFFICIAL RECORD
Requested By: **APN#**: 1220-09-415-011 eTRCo, LLC Douglas County - NV Karen Ellison - Recorder **Recording Requested By:** Page: 1 of 5 Fee: \$1 BK-614 PG-2687 RPTT: 0.00 Fee: \$18.00 Western Title Company, Inc. **Escrow No.:** 064846-ARJ When Recorded Mail To: Grant E, Myers 1460 Foothill Road Markleeville, CA 96120 Mail Tax Statements to: (deeds only) (space above for Recorder's use only) I the undersigned hereby affirm that the attached document, including any exhibits, hereby submitted for recording does not contain the social security number of any person or persons. (Per NRS 239B.030) Signature **Escrow Assistant** Susan Lapin

Power of Attorney

This page added to provide additional information required by NRS 111.312 (additional recording fee applies)

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APN#: 1220-09-415-011

Recording Requested By: .Cathleen Hammond		
When Recorded Mail To:		
Grant E. Myers 3460 Foothill Road		
Markleeville, CA 96120	***************************************	

I the undersigned hereby affirm that the attached document, including any exhibits, hereby submitted for recording does not contain the social security number of any person or persons. (Per NRS 239B.030)

Signature		\ \
	Cathleen Hammond	Owner
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Power of Attorney

This page added to provide additional information required by NRS 111.312 (additional recording fee applies)



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POWER OF ATTORNEY

(Special)

WARNING: THIS DOCUMENT GIVES YOUR ATTORNEY-IN-FACT THE POWER TO ACT FOR YOU IN ANY WAY YOU COULD ACT FOR YOURSELF. IT MAY BE IN YOUR BEST INTEREST TO CONSULT WITH AN ATTORNEY TO EXPLAIN ANYTHING ABOUT THIS FORM THAT YOU DO NOT UNDERSTAND. YOU HAVE THE RIGHT TO REVOKE OR TERMINATE THIS POWER OF ATTORNEY AT ANYTIME.

KNOWN ALL MEN BY THESE PRESENTS: That: I Cathleen Hammond, the undersigned (jointly and severally, if more than one) do hereby appoint Grant E. Myers, as my exclusive, true and lawful Attorney-in-Fact in my capacity, for me and in my name, for the special and limited purpose(s) of with respect to the following described property in the County of Douglas, State of Nevada:

Lot 11, in Block 2, on the Final Map, 97-008-6, of SILVERRANCH PHASE 6, filed in the Office of the County Recorder of Douglas County, State of Nevada, on August 23, 2001, in Book 0801, Page 6153, as Document No. 521220.

Per NRS 111.312, this legal description was previously recorded as Document No. 0718482 in Book 0208, at Page 5407, on February 25, 2008

more commonly known as: 1257 Sierra Vista Gardnerville, NV 89460

For such limited and special purposes, said Attorney(s) is/are hereby authorized in Principal's name, and for Principal's use and benefit;

- (A) to loan, advance, defer payment of, demand, sue for, collect, and receive all sums of money, debts, accounts, legacies, bequests, interests, dividends, annuities, and demands as are now or shall hereafter become due, owing, payable, or belonging to Principal, and take all lawful means in the name of Principal for the recovery thereof and to compromise the same, and give satisfaction, releases or discharges for the same;
- (B) to buy and sell land, exchange, mortgage, hypothecate, foreclose, assign, transfer, convey and in any lawful manner deal in and with land, make contracts of every kind relative to land, any interests therein or the possession thereof, and take possession and exercise control over the use thereof;
- (C) to buy, sell, exchange, mortgage, hypothecate, foreclose, assign, transfer, convey and in any lawful manner deal in and with goods, wares, and merchandise, chooses in action, certificates or shares of capital stock, and other property in possession or in action, and to make, do and transact all and every kind of business or whatever nature;
- (D) to execute, acknowledge and deliver contracts of sale, escrow instructions, deeds, leases (including both oil and gas and community oil and gas leases), assignments of leases, covenants, agreements, assignments of agreements, mortgages, conveyances in trust to secure indebtedness or other obligations, and assign the beneficial interest thereunder, subordination's of liens or encumbrances, indemnities, bills of lading, bills, bonds, notes, receipts, evidences of debt, requests for partial or full reconveyance of deeds of trust, releases and satisfactions of mortgages, judgments, and other debts, and other instruments in

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writing of whatever kind and nature, all upon such terms and conditions and under such covenants as said Attorney shall provide;

- (E) to receive any Notice of Right to Cancel under the Truth in Lending Act on my behalf, to modify or waive my right to rescind to pass without exercising such right to rescind, and to confirm that such right to rescind has not been exercised;
- (F) to sign, seal, execute, deliver and acknowledge such instruments in writing of whatever kind and nature as may be necessary or proper in the premises;
- (G) To receive and endorse check for net proceeds of loan or hypothecation of Note.

GIVING AND GRANTING to said Attorney full power and authority to do all and every act and thing whatsoever requisite and necessary to be done relative to any of the foregoing as fully to all intents and purposes as Principal might or could do if personally present.

All that said Attorney shall lawfully do or cause to be done under the authority of this Power of Attorney is expressly approved, ratified and confirmed.

Signed this _	SQF ATTACHOD	4.	
Ĉá	thee Hammond	NAC	m
	Cathleen Hammond	/ /	ATTACHED
	CERTIFICATE OF ACKNO	WLEDGMENT OF	NOTARY PUBLIC
	STATE OF	_//	}ss
	COUNTY OF		
	This instrument was acknowledged	before me on 517	AT.
L	By Cathleen Hammon		
			_
		Notary Public	

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CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

Obaba of Oalifamia	•	\wedge
State of California		
County of		\ _a
On MAY 13, 2014 before me, A	IMPE TRUTTISE N	JOTARY PUBLIC
personally appeared	Here Insert Name and Title of the Office	ir ,
personally appeared	Name(s) of Signer(s)	
W	vho proved to me on the ba	sis of satisfactory
e	evidence to be the person(s) who	ose name(s) is/aré
	subscribed to the within instrument o me that hø/she/they execu	
'n	nis/her/their authorized capacity((iøs), and that by
K	his/her/their signature(s) on the erson(s), or the entity upon be	é instrument the
	person(s) acted, executed the inst	
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AIMEE TROTTER	aws of the State of California	
Z is a least votal y rubit - Cambrilla Z	paragraph is true and correct.	
Calaveras County My Comm. Expires Aug 11, 2015	VITNESS my hand and official s	eal.
	d. Mu 1.5	\
Place Notary Seal Above	Signature: Signature of Note	ary Public
Though the information below is not required by law,		
and could prevent fraudulent removal and i	reattachment of this form to another doc	ument.
Description of Attached Document Title or Type of Document:		
Document Date:	Number of Page	
Signer(s) Other Than Named Above:	Number of Page	35
Capacity(ies) Claimed by Signer(s)	/ / /	
Signer's Name:	_ Signer's Name:	
☐ Corporate Officer — Title(s):	Corporate Officer — Title(s):_	
Individual RIGHT THUMBPRINT OF SIGNER	☐ Individual	RIGHT THUMBPRINT OF SIGNER
☐ Partner — ☐ Limited ☐ General Top of thumb here ☐ Attorney in Fact	□ Partner — □ Limited □ Gene□ Attorney in Fact	Top of thumb here
☐ Trustee	☐ Trustee	
☐ Guardian or Conservator	☐ Guardian or Conservator	
□ Other:	☐ Other:	
Signardo Dopresentina:	Cionar la Danua antino	
Signer is Representing:	Signer Is Representing:	— [