DOUGLAS COUNTY, NV

2021-972242

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FIRST CENTENNIAL - RENO (MAIN OFFICE)

KAREN ELLISON, RECORDER

APN No.: 1320-33-817-029

Escrow No.: 21019142-ES

Recording Requested By: First Centennial Title Company of Nevada 896 W Nye Ln, Ste 104 Carson City, NV 89703

When Recorded Return to:
Surratt Law Firm
Attn: Melissa Exline
3705 Lakeside Dr
Reno, NV 89509
Mail Tax Statements to:
Ronald R. Whiteley and Bobbi L. Whiteley,
Trustees of Whiteley Family Trust dated May
18th, 2016
722 Pinto Circle
Gardnerville, NV 89410

SPACE ABOVE FOR RECORDERS USE

DURABLE POWER OF ATTORNEY

(Title of Document)



DURABLE POWER OF ATTORNEY

I, FRANK DAMIAN, appoint MELISSA L. EXLINE, ESQ., my true and lawful attorney-in-fact, (hereinafter referred to as 'agent') for me and in my name, to do any and all acts pertaining to the real estate transaction of the real property located at 1361 Brooke Way, Gardnerville, Nevada 89410, which I could do if personally present. This durable power of attorney becomes effective immediately when I sign it.

My agent shall act without bond.

My agent may perform for me and in my name and on my behalf any act in the management, supervision, care, and execution of the real estate transaction of the real property located at 1361 Brooke Way, Gardnerville, Nevada 89410, that I personally have authority to perform. My agent may exercise for me and in my name and on my behalf the powers enumerated below, which are intended to illustrate, and not to limit, the scope of this power. This power of attorney shall apply to the real property owned by me, whether title is held as sole owner, as a joint tenant, as a tenant in common, as grantor or trustee of a revocable living trust, or otherwise.

- A. <u>DEEDS</u>: My agent may sign, execute, deliver and acknowledge such deeds, deeds of trust, covenants, indentures, agreements, mortgages, pledge agreements, notes, receipts, checks, bills of exchange, evidence of debts, releases and satisfactions of mortgage debts, judgment debts and other debts.
- B. <u>REAL ESTATE PROPERTY</u>: My agent may sell, exchange, option, and convey my real property located at 1361 Brooke Way, Gardnerville, Nevada 89410; execute and deliver deeds of general warranty, with the customary covenants for such property; manage and control my real property located at 1361 Brooke Way, Gardnerville, Nevada 89410; settle, compromise, and adjust insurance claims.
- C. <u>SEVERABILITY</u>: The invalidity of a provision of this power of attorney shall not affect another provision.
- D. <u>COMPENSATION</u>: My agent shall be reimbursed for all reasonable costs and expenses actually incurred and paid under this power of attorney. My agent is entitled to compensation for services rendered under it.

Page 2, Durable Power of Attorney of Frank Damian

THIS POWER OF ATTORNEY SHALL NOT BE AFFECTED BY MY SUBSEQUENT DISABILITY, INCAPACITY, OR INCOMPETENCY.

I hereby declare that any act or thing lawfully done hereunder by my said agent shall be binding upon me, my heirs, legal representatives, personal representatives, and assigns.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this Ray of, 2021, at the County of _A(AUCI)_, State of
FRANK DAMIAN
JURAT
JURAI
A notary public or other officer completing this
certificate verifies only the identity of the individual
who signed the document to which this certificate is
attached, and not the truthfulness, accuracy, or validity
of that document.
On, 2021, before me,, Notary Public, personally
appeared Frank Damian, who proved to me on the basis of satisfactory evidence to the person
whose name is subscribed to the within instrument and acknowledged to that he executed the same in his authorized capacity, and that by his signature on the instrument the person, or the
entity upon behalf of which the person acted, executed the instrument.
salary upon contain a manufacture person delegation and an annual
I certify under PENALTY of PERJURY under the laws of the State of California that the
foregoing paragraph is true and correct.
WITNESS my hand and official seal.
NOTARY PUBLIC
Soo cettoched
See cettoched certificate

This instrument was drafted by Melissa L. Exline, Attorney-at-Law 3705 Lakeside Drive, Reno, Nevada 89509

CALIFORNIA ALL- PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

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State of California	. }
County of Alcemedo	}
7	
On July 28, 2021 before me,	AIEX Blywicherow Motory Pressic
personally appeared Frank	2 a Maria and the officery
	factory evidence to be the person(s) whose
	instrument and acknowledged to me that
	ner/their authorized capacity(ies), and that by
	nent the person(s), or the entity upon behalf of
which the person(s) acted, executed th	e instrument.
I certify under PENALTY OF PERJURY	Y under the laws of the State of California that
the foregoing paragraph is true and co	rrect.
WITNESS my hand and official seal.	ALEX BLYAKHEROV
a / /	COMM. NO. 2361636 ± NOTARY PUBLIC - CALIFORNIA ω
Record	ALAMEDA COUNTY MY COMM. EXPIRES JULY 14, 2025 (
Notary Public Signature (N	lotary Public Seal)
·	•
ADDITIONAL OPTIONAL INFORMATI	INSTRUCTIONS FOR COMPLETING THIS FORM This form complies with current California statutes regarding notary wording and.
DESCRIPTION OF THE ATTACHED DOCUMENT	if needed, should be completed and attached to the document. Acknowledgments from other states may be completed for documents being sent to that state so long
Dr. Calla Dours and ation	as the wording does not require the California notary to violate California notary
Ou re file power of strong (Title or description of attached document)	 law. State and County information must be the State and County where the document
	signer(s) personally appeared before the notary public for acknowledgment. • Date of notarization must be the date that the signer(s) personally appeared which
(Title or description of attached document continued)	must also be the same date the acknowledgment is completed. The notary public must print his or her name as it appears within his or her
Number of Pages Document Date	commission followed by a comma and then your title (notary public).
	 Print the name(s) of document signer(s) who personally appear at the time of notarization.
CAPACITY CLAIMED BY THE SIGNER	 Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/she/thev. is /ere) or circling the correct forms. Failure to correctly indicate this
☐ Individual (s)☐ Corporate Officer	information may lead to rejection of document recording. The notary seal impression must be clear and photographically reproducible.
	Impression must not cover text or lines. If seal impression smudges, re-seal if a
(Title) □ Partner(s)	sufficient area permits, otherwise complete a different acknowledgment form. • Signature of the notary public must match the signature on file with the office of
Attorney-in-Fact	the county clerk. Additional information is not required but could help to ensure this
☐ Trustee(s)	acknowledgment is not misused or attached to a different document. Indicate title or type of attached document, number of pages and date.
Other	indicate the or type of attached document, humber of pages and date. Indicate the capacity claimed by the signer. If the claimed capacity is a

corporate officer, indicate the title (i.e. CEO, CFO, Secretary).

· Securely attach this document to the signed document with a staple.

2015 Version www NotaryClasses.com 800-873-9865