

RECORDING REQUESTED BY

AND WHEN RECORDED MAIL TO:

NAME

STREET ADDRESS

CITY, STATE & ZIP CODE

SPACE ABOVE THIS LINE FOR RECORDER'S USE ONLY

LIMITED POWER OF ATTORNEY

KNOW ALL PERSONS BY THESE PRESENTS: That I, _____, the undersigned (jointly and severally if more than one, hereinafter collectively "principal"), hereby make, constitute and appoint

principal's true and lawful attorney to act for principal and in principal's name, place and stead and for principal's use and benefit:

(a) To

Principal hereby grants to said attorney in fact full power and authority to do and perform each and every act and thing which may be necessary, or convenient, in connection with any of the foregoing, as fully, to all intents and purposes, as principal might or could do if personally present, hereby ratifying and confirming all that our said attorney in fact shall lawfully do or cause to be done by authority hereof.

This Limited Power of Attorney is granted for a period of _____ and shall become effective on _____, _____ and shall terminate on _____, _____.

Wherever the context so requires, the singular number includes the plural.

WITNESS my hand this _____ day of _____, _____.

STATE OF CALIFORNIA }
COUNTY OF _____ }

On _____ before me, _____, personally appeared
(here insert name and title of the officer)

who 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.

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.

SIGNATURE _____ (SEAL)

Before you use this form, fill in all blanks, and make whatever changes are appropriate and necessary to your particular transaction. Consult a lawyer if you doubt the form's fitness for your purpose and use.