

DISTRICT OF COLUMBIA LIMITED POWER OF ATTORNEY

THIS POWER OF ATTORNEY AUTHORIZES THE PERSON NAMED BELOW AS MY ATTORNEY-IN-FACT TO DO ONE OR MORE OF THE FOLLOWING: TO SELL, LEASE, GRANT, ENCUMBER, RELEASE OR OTHERWISE CONVEY ANY INTEREST IN MY REAL PROPERTY, AN TO EXECUTE DEEDS AND ALL OTHER INSTRUMENTS ON MY BEHALF, UNLESS THIS POWER OF ATTORNEY IS OTHERWISE LIMITED HEREIN TO SPECIFIC REAL PROPERTY.

KNOW ALL MEN BY THESE PRESENTS: That I,								
(Your Full Name) of								
(Full	Current	Legal	Address),	have	made,	constituted	and	appointed
					(Name	of	Representa	tive) of
							(Full C	urrent Legal
Address) my true and lawful attorney-in-fact, for me in my name and stead, for the purpose of								
obtaining	g a o	deed of	f trust	loan	in the	amount	not t	to exceed
						(Dolla	r Amount	In Letters)
(\$) (Dollar Amount In Numbers) from the STATE DEPARTMENT								
FEDERAL CREDIT UNION; to do all matters necessary for the consummation of said loan,								
including procedures necessary to secure said loan with the following described property:								

My attorney-in-fact is further authorized to execute, sign and endorse for me any and all disclosure statements, settlement statements, loan documents, deed of trust, notice of right to cancel form, proceeds checks, and any other legal documents required to obtain the aforementioned deed of trust loan, and to do, execute and perform all and every other acts or acts, thing or things, in lawful need, and necessary to be done to effect complete settlement of said loan.

This Power of Attorney shall not terminate on the disability, incompetence or incapacity of the undersigned.

I do hereby ratify and confirm all things so done by my said attorney-in-fact, within the scope of the authority herein given to him/her, as fully and to the extent as if by me personally done and performed.

In testimony whereof, I have hereunto, set my hand and seal this _____ day of _____ (Month), _____ (Year).

STATE OF _____

CITY/COUNTY OF _____

Suscribed and sworn before me this _____ day of _____ (Month), _____ (Year).

NOTARY PUBLIC

My Commission Expires: