	A have this Line	for Official Use Only	
	cording requested b	•	
Name:	oramg requested o	y und rotain to.	
Company:			
Address:			
City:	State:	Zip:	
Tax Map Key N	lumber:		
		ECIAL POWER OF A SING REAL ESTATE (Agent for Purchase	E TRANSACTION
STATE OF E	IAWAII		
COUNTY OI			
		_	
KNOW ALL	MEN BY THE	SE PRESENT, THAT I	[
whose addres	s is	,	, desiring to execute a
SPECIAL PC	OWER OF ATT	ORNEY, hereby appoir	
		, of	County, Hawaii, as
my Attorney-	in-Fact to act as		unto my Attorney-in-Fact full power
to:			

To do all things necessary to close on the purchase of the property described

and authority for me and in my name to sign, seal, execute, acknowledge, and deliver and accept any and all documents necessary to effect the purchase and settlement on said property from the owner thereof, including but not limited to, sales contracts and addendum thereto, negotiable instruments, deeds, deeds of trust, or other instruments, disclosure statements, closing or settlement statements, etc. FURTHER GRANTING full power and authority to pay any funds for the purchase and the execution of any and all documents in connection therewith,

including, but not limited to notes, deeds of trust or mortgages.

(address), with full power

The legal description of the property is as follows, to-wit:

below, commonly known as

I hereby ratify and confirm all that said attorney-in-fact shall lawfully do or cause to be done by virtue of this Power of Attorney and the rights and powers herein granted.

All acts done by means of this power shall be done in my name, and all instruments and documents executed by my Attorney hereunder shall contain my name, followed by that of my attorney and the description "Attorney-in-Fact", excepting however any situation where local practice differs from the procedure set forth herein, in that event local practice may be followed. This SPECIAL POWER OF ATTORNEY shall be valid and may be relied upon by any third parties until such time as any revocation is recorded in the recorder's office of the county where the land is located.

DATED this the	day of	, 20	
		Signature Print Name:	
STATE OF HAWAII			
COUNTY OF			
On this before me personally ap to me known to be the p instrument, and acknow and deed. My Commission Expire	ledged that he/sho	, 20	ted the foregoing is/her/their free act
	_		
Principal Name and	d Address	Attorney-in-Fact Na	ame and Address
Name:			
Address:		Address:	
City:		City:	
State: Zig	D:	State:	Zip: