	FORM No. 18 - BOULDA -			
	TK 22020			
	* 23936		Vol. 483 Page Skoy	. 97294
	KNOW ALL MEN	BY THESE PRESENTS. That I	MOHAMMAD SOLEIMAN,	- A
	have made, constituted and	Popolitical and a	MONANIVIAD SOLEIMAN,	
	PRISCILLA ANN	appointed and by these presents do $50LEIMAN$	make, constitute and appoint	
	my true and lawful attorney	, for me and in my name, place an	d stead and for my use and benefit, to	
			and benefit, to	
				ļ
1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 -				
ei Bi	ving and granting unto my sa	id attorney faut -	y to do and perform all and every act and thing	
	hatsoever requisite and necess	ary to be done, as fully to all	y to do and perform all and every act and thing nts and purposes, as I might or could do if per- attorney shall lawfully do or cours to it.	
by	virtue hereof	and confirming all that my seid	y to do and perform all and every act and thing nts and purposes, as I might or could do if per- attorney shall lawfully do or cause to be done,	}
	In construing this instru-		ires, the singular includes the plural.	
Da		10 Go	ires, the singular includes the	3
×	M. Soloin	and the second s	in angular maddes the plural.	
	a chan	lan/		
			······································	
677	ATE OF OREGON, County o Personally appeared the st			
511		I DIAMATH ,		
512				
512			Soleimani, 19	
	and ackr	nowledged the foregoing instrument	to be NIS voluntary act and deed	·
(ÖF1	and ackr	nowledged the foregoing instrument Before me:	to be Wis voluntary act and deed.	
(ÖF1	and ackr	nowledged the foregoing instrument Before me:	to be Wis voluntary act and deed.	
(ÖF1		Before me: Mo ha mma d Notary Public for Ore	to be NIS voluntary act and deed	
(ÖF1	and ackr	Before me: Mo ha mma d Notary Public for Ore	son. My commission expires 12-4-3 STATE OF OREGON	
(ÖF1	FICIAL SEAL	Before me: Mo ha mma d Notary Public for Ore	son. My commission expires /2-4-83 STATE OF OREGON, County of Klamath }ss.	
(ÖF1	FICIAL SEAL	Before me: Mo ha mma d Notary Public for Ore	son. My commission expires 12-4-53 STATE OF OREGON, County of Klamath }ss.	
(ÖF1	FICIAL SEAL	Before me: Mo ha mma d Notary Public for Ore	son. My commission expires 12-4-8.3 STATE OF OREGON, County of Klamath ss. I certify that the within instru- ment was received for record on the 26th day of Max	
(ÖF1	FICIAL SEAL	Before me: Mo ha mma d Notary Public for Ore	son. My commission expires 12-4-83 STATE OF OREGON, County of Klamath }ss. I certify that the within instru- ment was received for record on the 26th day of May .1983, at 11:53 clock A M and	
(ÖF1	FICIAL SEAL)	Before me: Mo ha mmad Notary Public for Ore	son. My commission expires 12-4-5.3 STATE OF OREGON, County of Klamath ss. I certify that the within instru- ment was received for record on the 26th day of May ,1983, at 11:53 clock A.M., and recorded in book/reel/volume No. M83 , on page 8259	
(ÖFI	FICIAL SEAL)	Before me: Mo ha kn mad Novledged the foregoing instrument Before me: Musav Ka Notary Public for Ore EY	son. My commission expires 12-4-4.3 STATE OF OREGON, County of Klamath ss. I certify that the within instru- ment was received for record on the 26th day of May ,1983, at 11:53 clock A.M., and recorded in book/reel/volume No. M83 , on page .8259 or as fee/file/instru- ment/microfilm/records	
(OFI	FICIAL SEAL)	Before me: Susav Ka Notary Public for Ore	son. My commission expires 12-4-4.3 STATE OF OREGON, County of Klamath ss. I certify that the within instru- ment was received for record on the 26th day of May ,1983, at 11:53 clock A.M., and recorded in book/reel/volume No. M83 , on page .8259 or as fee/file/instru- ment/microfilm/reception No. 23936, Record of Power of Mathematical	
COP C	FICIAL SEALS FICIAL SEALS POWER OF ATTORN (FORM No. 15) TO	Before me: Mo ha kn mad Novledged the foregoing instrument Before me: Musav Ka Notary Public for Ore EY	son. My commission expires /2-4-4.3 STATE OF OREGON, County of Klamath }ss. I certify that the within instru- ment was received for record on the 26th day of May .19 83, at 11:53 clock A.M. and recorded in book/reel/volume No. M83 .on page .8259 or as fee/file/instru- ment/microfilm/reception No. 23936, Record of Power. of Attorney of said County. Witness my hand and	
7 00 7 00 7 P. S.	FICIAL SEALS FICIAL SEALS POWER OF ATTORN (FORM No. 15) TO TO AFTER RECORDING RETURN TO O.L. E.M. A.V.	Before me: Mo ha kn mad Novledged the foregoing instrument Before me: Musav Ka Notary Public for Ore EY	son. My commission expires 12-4-4.3 STATE OF OREGON, County of Klamath ss. I certify that the within instru- ment was received for record on the 26th day of May ,1983, at 11:53 clock A.M., and recorded in book/reel/volume No. M83 , on page .8259 or as fee/file/instru- ment/microfilm/reception No. 23936, Record of Power of Mathematical	
7 00 7 7 7 7 7 7 7 7 7 7 7 7 7 7	FICIAL SEALS FICIAL SEALS POWER OF ATTORN (FORM No. 15) TO TO AFTER RECORDING RETURN TO O.L. E.J. M. A.M. B.J.E.H.M. S.T.	Before me: Mo. ha kn ma d nowledged the foregoing instrument Before me: Mosay Ha Notary Public for Ore Notary Public for Ore SPACE RESERVED FOR RECORDER'S USE	son. My commission expires /2-4-8.3 STATE OF OREGON, County of Klamath }ss. I certify that the within instru- ment was received for record on the 26th day of May .1983, at 11:53 clock A.M. and recorded in book/reel/volume No. M83 .on page .8259 or as fee/file/instru- ment/microfilm/reception No. 23936, Record of Power. of Attorney. of said County. Witness my hand and seal of County affixed.	
7000 7000 7000 7000 7000 7000 7000 700	FICIAL SEALS FICIAL SEALS POWER OF ATTORN (FORM No. 15) TO TO AFTER RECORDING RETURN TO O.L. E.M. A.V.	Before me: Mo. ha kn ma d nowledged the foregoing instrument Before me: Mosay Ha Notary Public for Ore Notary Public for Ore SPACE RESERVED FOR RECORDER'S USE	son. My commission expires /2-4-4.3 STATE OF OREGON, County of Klamath }ss. I certify that the within instru- ment was received for record on the 26th day of May .19 83, at 11:53 clock A.M. and recorded in book/reel/volume No. M83 .on page .8259 or as fee/file/instru- ment/microfilm/reception No. 23936, Record of Power. of Attorney of said County. Witness my hand and	