## 33986

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KNOW ALL MEN BY THESE PRESENTS, That I, Rory Lyn Webb father of Jennifer Webb

have made, constituted and appointed and by these presents do make, constitute and appoint Clarence E. Webb and or Shirley L Webb my true and lawful attorney, for me and in my name, place and stead and for my use and benefit, to

take full responsibility and guardianship, of my daughter, of my custody Jennifer Webb. Allowing Clarence and Shirley to care for Jennifer's welfare and wellbeing. This includes and duties performed as a legal guardian. Schooling, Hospitalization, legal ...

This document begins this day Feb 27, 1984 an includes each day there after until the day of June 30, 1984. whereas I Rory Webb will resume full custody of my daughter Jennifer Webb

## Therefore

giving and granting unto my said attorney full power and authority to do and perform all and every act and thing whatsoever requisite and necessary to be done, as fully, to all intents and purposes, as I might or could do if personally present, hereby ratifying and confirming all that my said attorney shall lawfully do or cause to be done,

In construing this instrument and where the context so requires, the singular includes the plural. Dated Feb. 27, 19.84 Kory Lyn Webb

| 2 .  | *************************************** |   |
|--|---|---|
| STATE OF OREGON CO.  | . VI U                                  | ······································        |
| Personally appeared the  | of                                      | Webb Jeb 28 , 1984  be voluntary act and deed |
| and ack  | nowledged the foregoing instrument to   | Webb  |
| Charles of the control of the contro | Before me: Dernetha                     | Noluntary act and deed                        |
| (OFFICIAL SEAL)  | me. Delice                              | V7 01/201                                     |
|  | Notary Public for Orego                 | on. My commission expires 12-29-85            |

| POWER OF ATTORNEY (FORM. No. 15) |   |
|----------------------------------|---|
|                                  |   |
| то                               |   |
|                                  | SPACE RESERVED<br>FOR<br>RECORDER'S USE |
| AFTER RECORDING RETURN TO        |   |

Webb SIST East Main st

NAME, ADDRESS, ZIP

| STATE OF OREGON, County of Klamath ss.  |
|---|
| County of Klamath ss.   |
| I certify that the within increase  |
| ment was received for record on the day of Polymany 10 314 ar 154 o'clock A.M., and recorded in |
| book/reel/volume No. MS4 on   |
| page. JUV   |
| ment/microfilm/reception No. 33 36 Record of Power of Attor ay                                  |
| Record of Dower of Attorney   |
| of said County.   |
| Witness my hand and seal of   |
| County affixed.   |
| Trelan Biologia   |