

TK

67661

Vol. 1386 Page

19711



RUTHANN THOMAS VANDERBLOOM

KNOW ALL MEN BY THESE PRESENTS, That I,

have made, constituted and appointed and by these presents do make, constitute and appoint

DANIEL NELSON KAMBIC, 568-76-9298

my true and lawful attorney, for me and in my name, place and stead and for my use and benefit, to act as my agent in all health matters relating to the care of CHRISTOPHER ADAM VANDERBLOOM, DOB: 10 August 1979, and CHARLES ANTHONY VANDERBLOOM, DOB: 15 August 1980, to include, but not limited to; routine medical care, dental care, and any emergency medical or surgical care that might arise.

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, by virtue hereof.

In construing this instrument and where the context so requires, the singular includes the plural.
Dated 10 October, 1986

Ruthann Thomas Vanderbloom
RUTHANN THOMAS VANDERBLOOM, 526-11-7822

P.O. Box 17202, Klamath Falls OR 97602

STATE OF OREGON, County of Klamath) ss. October 10, 1986
Personally appeared the above named Ruthann Thomas Vanderbloom

and acknowledged the foregoing instrument to be her voluntary act and deed.



Before me:

[Signature]
Notary Public for Oregon. My commission expires 8/8/90

POWER OF ATTORNEY

(FORM No. 15)

TO

AFTER RECORDING RETURN TO

Ruthann T. Vanderbloom
Box 7202
KFO.

NAME, ADDRESS, ZIP

SPACE RESERVED
FOR
RECORDER'S USE

Fee: \$5.00

STATE OF OREGON, } ss.
County of Klamath

I certify that the within instrument was received for record on the 31st day of October, 1986, at 12:04 o'clock P.M., and recorded in book/reel/volume No. 1155, on page 19711 or as fee/file/instrument/microfilm/reception No. 67661, Record of Power of Attorney of said County.

Witness my hand and seal of County affixed.

Evelyn Bishn, County Clerk
NAME TITLE

By *[Signature]* Deputy

40 21 11 13 130 98
198 OCT 31 PM 12