

67942

This instrument was recorded at request of:

Vol. MSD Page 20313

MTC

SPECIAL POWER  
OF ATTORNEY

The recording official is directed to return this instrument or a copy to the above person.

MTC-17280-K

Space Reserved For Recording Information

**DURABLE  
SPECIAL POWER  
OF ATTORNEY**

R-17 © LawForms 10-83, 4-85

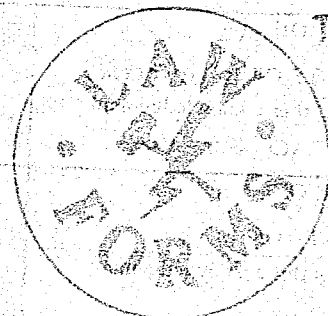


Effective Date: <u>10/27/86</u>	Expiration Date: <u>—</u>	County and State: <u>County of Marion State of Arizona</u>
PRINCIPAL: (Name, Address and Zip Code) <u>DIANE SWAB</u> <u>7805 NO 21ST LANE</u> <u>PHX, AZ 85001</u>		ATTORNEY-IN-FACT: (Name, Address and Zip Code) <u>JEANE C. SWAB</u> <u>7133 ROSARIA PLACE</u> <u>KLAMATH FALLS, OREGON</u> <u>97603</u>

Principal constitutes and appoints Attorney-in-Fact to act as its true and lawful attorney for and in its name, place, and stead to perform the following acts and things:

REAL PROPERTY TRANSATION:to buy REAL ESTATE at: 3949 LA MARADAWAY  
KLAMATH FALLS, OREGON  
97603.

(Continued on Reverse Side)



STATE OF OREGON, COUNTY OF CLATSOP  
 I, \_\_\_\_\_, County Clerk,  
 do hereby certify that the foregoing instrument was duly recorded in Vol. \_\_\_\_\_, Page \_\_\_\_\_, on this \_\_\_\_\_ day of \_\_\_\_\_, 1986.  
 BY \_\_\_\_\_, County Clerk

906 NOV 7 PM 2 55

81805

**SPECIAL POWER  
OF ATTORNEY**

R-17 • LawForms 10-83, 4-85

20314

1. Principal gives and grants to Attorney-in-Fact full power and authority to do and perform all and every act and thing whatsoever requisite and necessary to be done in and about the premises, as fully to all intents and purposes as it might or could do if personally present. Principal ratifies and confirms all that Attorney-in-Fact shall lawfully do or cause to be done by virtue of this special power of attorney.
2. This Special Power of Attorney shall not be affected by disability of the Principal.
3. This Special Power of Attorney may be revoked by the Principal giving actual written notice to anyone dealing with the attorney-in-fact or by recording a Revocation of Power of Attorney with the County Recorder of Maricopa County Arizona. If this Special Power of Attorney is not revoked within 6 months from its effective date by recording a Revocation, it shall be considered to be renewed and effective for additional 6 months periods until either revoked by recording a Revocation of Power of Attorney or expired pursuant to the expiration date. The failure of the Principal to record this Revocation shall be construed as a renewal of the Power of Attorney.

**WARNING TO PERSONS EXECUTING THIS SPECIAL POWER OF ATTORNEY**

This is an important legal document. It creates a durable power of attorney. Before executing this document, you should know these important facts:

1. This document may provide the person you designate as your attorney-in-fact with broad powers to dispose, sell, convey, and encumber your real and personal property.
2. These powers will exist for an indefinite period of time unless you limit their duration in this document. These powers will continue to exist notwithstanding your subsequent disability or incapacity.
3. You have the right to revoke or terminate this durable power of attorney at any time by (a) recording a revocation in the public office designated for that purpose on this Special Power of Attorney and (b) directly notifying your attorney-in-fact and anyone who may be dealing with your attorney-in-fact with respect to your property or other matters.

Maria Klein

Signatures of Witnesses

DIANE SWAB  
DIANE SWAB

Signatures of Principal

STATE OF Az

COUNTY OF Maricopa

Date of this acknowledgement

10-27-86

Acknowledgement. On this date, before me, a Notary Public, personally appeared: Diane Swab

known to me or satisfactorily proven to be the person whose name is subscribed to this instrument and acknowledged that he executed the same. If this person's name is subscribed in a representative capacity, it is for the principal named and in the capacity indicated.

Signature of Notary Public

Notary Expiration Date

My Commission Expires June 29, 1989

Signature of Notary Public

Notary Expiration Date

STATE OF

COUNTY OF

Date of this acknowledgement

Acknowledgement. On this date, before me, a Notary Public, personally appeared:

known to me or satisfactorily proven to be the person whose name is subscribed to this instrument and acknowledged that he executed the same. If this person's name is subscribed in a representative capacity, it is for the principal named and in the capacity indicated.

STATE OF OREGON: COUNTY OF KLAMATH:

ss.

Filed for record at request of

of November

A.D., 19 86

at

2:55

o'clock

P

M., and duly recorded in Vol. 20313

the 7th

day

on Page 20313

20313

FEE \$9.00

By Evelyn Blehn, County Clerk

Sam Smith