

86403

DELEGATION OF POWERS

Vol. M88 Page 6046STATE OF Oregon }
County of Klamath } ss.:I, Theresa Mauread Glass ^{D.B.M.} being duly sworn,
depose and say:I am the custodial parent or legal guardian of Joshua Michael
Edrick and Jacob Alan ^{Edrick} ages 2 y 8 m (May 23), a minor(s);and pursuant to ORS 126.030, I hereby grant full custody and control
of said child(ren) to: Dorothy Beatrice Mooreto act with full authority regarding any matter concerning the
care, custody, or property of said child; to act as I/we would
act, including but not limited to: granting of consent for any
medical, dental, psychological, psychiatric examinations, care,
or treatment including vaccinations or immunizations; enrollment
in school and participation in school activities; applying for
public benefits; and any other matter regarding the health or
welfare of said child except: the power to consent to the marriage
or adoption of said child(ren) and _____This power of attorney shall be valid for a period ending 4/26/88

but in no case for more than 180 days.

I/we reserve the power to terminate this authority at any time.

Signed: Theresa M. GlassSUBSCRIBED AND SWORN to before me this 18 day of April
1988NOTARY PUBLIC FOR OREGON
My Commission expires: 4/1/90Dorothy B. Moore
3925 Clifton St
Klamath Falls,
Oregon, 97603

STATE OF OREGON: COUNTY OF KLAMATH: ss.

Filed for record at request of Dorothy B. Moore the 18th day
of April A.D., 19 88 at 2:18 o'clock P M., and duly recorded in Vol. M88,
Power of Attorney Page 6046
By Evelyn Biehn County Clerk
Bernetha L. Litch

FEE \$5.00