

1908

Vol. m89 Page 11417KNOW ALL MEN BY THESE PRESENTS, That I, FRANCES R. HAGER

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

GLENN ERIC HAGER

my true and lawful attorney, for me and in my name, place and stead and for my use and benefit,

(1) To lease, let, grant, bargain, sell, contract to sell, convey, exchange, remise, release and dispose of any real or personal property of which I am now or hereafter may be possessed or in which I may have any right, title or interest, including rights of homestead, for any price or sum and upon such terms and conditions as to my said attorney may seem proper;

(2) To take possession of, manage, maintain, operate, repair and improve any and all real or personal property now or hereafter belonging to me, to pay the expense thereof, to insure and keep the same insured and to pay any and all taxes, charges and assessments that may be levied or imposed upon any thereof;

(3) To buy, sell and generally deal in and with goods, wares and merchandise of every name, nature and description and to hypothecate, pledge and encumber the same;

(4) To buy, sell, assign, transfer and deliver all or any shares of stock in my name in any corporation for any price and upon such terms as to my said attorney may seem right and proper and to receive and make payment therefor;

(5) To borrow any sums of money on such terms and at such rate of interest as to my said attorney may seem proper and to give security for the repayment of the same;

(6) To ask for, demand, recover, collect and receive all moneys, debts, rents, dues, accounts, legacies, bequests, interests, dividends and claims whatsoever which are now or which hereafter may become due, owing and payable or belonging to me and to have, use and take all lawful ways and means in my name for the recovery of any thereof by attachments, levies or otherwise;

(7) To prepare, execute and file any proof of debt and other instruments in any court and to take any proceedings under the Bankruptcy Act in connection with any sum of money or demand due or payable to me and such proceedings to vote in my name for the election of any trustee or trustees and to demand, receive and accept any dividend or distribution whatsoever;

(8) To adjust, settle, compromise or submit to arbitration any account, debt, claim, demand or dispute as well as matters which are now subsisting or hereafter may arise between me or my said attorney and any other person or persons;

(9) To sell, discount, endorse, negotiate and deliver any check, draft, order, bill of exchange, promissory note or other negotiable paper payable to me, and to collect, receive and apply the proceeds thereof for my use for any of the purposes aforesaid; to pay to or deposit the same or any other sum of money coming into the hands of my attorney in checking and in savings accounts in my name with any bank or banker of my attorney's selection and to draw out moneys deposited to my credit with any bank, including deposits in savings accounts, and to apply the same for any of the purposes of my business as my said attorney may deem expedient; to purchase and sell certificates of deposit; to appoint any bank or trust company as escrow agent; generally to conduct any and all banking transactions on my behalf;

(10) To make, execute and deliver any and all manner of contracts with reference to minerals, oil, gas, oil and gas rights, rents and royalties, including agreements facilitating exploration for and discovery of oil, minerals and deposits;

(11) To commence and prosecute and to defend against, answer and oppose all actions, suits and proceedings touching any of the matters aforesaid or any other matters in which I am or hereafter may be interested or concerned;

(12) To vote any stock in my name as proxy;

(13) To have access to any safety deposit box which has been or may be rented in my name or in the name of myself and any other person or persons;

(14) In connection with any of the powers herein granted, to sign, make, execute, acknowledge and deliver in my name any and all deeds, contracts, bills of sale, leases, promissory notes, drafts, acceptances, evidences of debt, obligations, mortgages, pledges, satisfactions, releases, acquittances, receipts, bonds, writs and any and all other instruments whatsoever, with such general or special agreements and covenants, including those of warranty, as to my said attorney may seem right, proper and expedient;

(15) To employ, pay and discharge clerks, workmen, brokers and others, including counsel and attorneys in connection with the exercise of any of the foregoing powers;

(16)

(17) Generally to conduct, manage and control all my business and my property, wheresoever situate, as my said attorney may deem for my best interests, hereby releasing all third persons from responsibility for the acts and omissions of my said attorney;

I hereby give and grant unto my said attorney full power and authority freely to do and perform every act and thing whatsoever requisite and necessary to be done in and about the premises, 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-in-fact shall lawfully do or cause to be done by virtue hereof.

91 JUN 25 PM 4 16

52 NOV 68

In construing this power of attorney, it is to be understood that the undersigned may be more than one person or a corporation and that, therefore, if the context so requires, the singular pronoun shall be taken to mean and include the plural, the masculine, the feminine and the neuter and that generally all grammatical changes shall be made, assumed and implied to make the provisions hereof apply equally to corporations and to more than one individual.

IN WITNESS WHEREOF, I have hereunto signed this instrument, or if a corporation, its corporate name has been signed and its corporate seal affixed hereto by its officers duly authorized thereunto by its board of directors, on this 23rd day of June, 1989.

Frances R. Hager
Frances R. Hager

(If a corporation, affix corporate seal.)

STATE OF Tennessee

INDIVIDUAL ACKNOWLEDGMENT

County of Maury

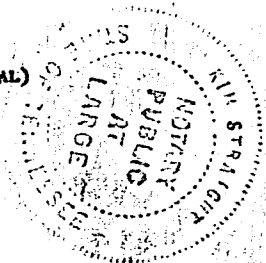
day of June, 1989, before me, a Notary Public in and for said county and state, personally appeared Frances R. Hager

known to me to be the identical person described in and who executed the foregoing Power of Attorney and acknowledged to me that she executed the same freely and voluntarily and for the uses and purposes therein mentioned.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my official seal on this, the day and year last hereinabove written

Kim Straight
Notary Public for Maury Co.
My commission expires 4.23.90

(SEAL)



STATE OF _____

CORPORATE ACKNOWLEDGMENT

County of _____

day of _____, 19____, before me, a Notary Public in and for said county and state, personally appeared _____ and _____ both to me personally known, who being duly sworn, did say that he, the said _____ is the president, and he, the said _____ is the secretary of _____ the within named corporation,

and that the seal affixed to said instrument is the corporate seal of said corporation, and that the said instrument was signed and sealed in behalf of said corporation by authority of its Board of Directors, and said _____ and _____ acknowledged said instrument to be the free act and deed of said corporation.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my official seal on this, the day and year first in this, my certificate, written.

(SEAL)

Notary Public for _____
My commission expires _____

General
Power of Attorney

(FORM No. 833)

STEVENS-HESS LAW FIRM, CO., PORTLAND, ORE.

Hager

TO

Hager

AFTER RECORDING RETURN TO

Hager at: 2860 Dagget
Klamath Falls, OR

SPACE RESERVED
FOR
RECORDER'S USE

STATE OF Oregon } ss.
County of Klamath

I certify that the within instrument was received for record on the 26th day of June, 1989 at 4:16 o'clock PM, and recorded in book/reel volume No. M89 on page 11417 or as document, fee, file, instrument, microfilm No. 1908 Record of Power of Attorney of said County.

Witness my hand and seal of County affixed.

Evelyn Biehn, County Clerk
By Charles Muelnders Deputy

OREGON STATE HEALTH DIVISION
DEPARTMENT OF HUMAN RESOURCES
Vital Records Unit
CERTIFICATE OF DEATH

46001
I.D. TAG NO.
247
Local File Number

136-

State File Number

1. DECEDENT'S NAME First Frieda Middle — Last QUEEN		2. SEX F	3. DATE OF DEATH (Month, Day, Year) July 7, 1988
4. SOCIAL SECURITY NUMBER 321-07-5158	5a. AGE - Last Birthday (Years) 79	5b. UNDER 1 YEAR Mos. — Days — Hours — Mins. —	5c. UNDER 1 DAY Mins. —
6. BIRTHPLACE (City and State or Foreign Country) Kiev, Russia		7. DATE OF BIRTH (Month, Day, Year) March 10, 1909	
8. WAS DECEDENT EVER IN U.S. ARMED FORCES? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
9a. PLACE OF DEATH (Check only one) <input type="checkbox"/> HOME <input type="checkbox"/> Hospital <input type="checkbox"/> Other <input type="checkbox"/> Decedent's Residence <input type="checkbox"/> Other (Specify)			
9b. FACILITY NAME (If not institution, give street and city) Mtn. View Care Center		9c. CITY, TOWN, OR LOCATION OF DEATH Klamath Falls	
10a. DECEDENT'S USUAL OCCUPATION (Give kind of work done during most of life. Do not use retired) Housewife		11. MARITAL STATUS - Married, Never Married, Widowed, Divorced (Specify) Widowed	
12. SPOUSE (If Married, Widowed) Oscar Queen		13. STREET AND NUMBER 2731 1/2 Altamont Drive	
13a. RESIDENCE - STATE Oregon	13b. COUNTY Klamath	13c. CITY, TOWN, OR LOCATION Klamath Falls	
13d. INSIDE CITY LIMITS? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	13e. ZIP CODE 97603	14. RACE American Indian, Black, White, etc. (Specify) White	15. DECEDENT'S EDUCATION (Specify only highest grade completed) Elementary/Secondary (0-12) 12 College (13-5+)
17. FATHER - NAME first middle last Morris — Wiener		18. MOTHER - NAME first middle maiden Etta —	
20a. METHOD OF DISPOSITION <input type="checkbox"/> Mausoleum <input type="checkbox"/> Burial <input type="checkbox"/> Cremation <input type="checkbox"/> Removal from State <input type="checkbox"/> Donation <input type="checkbox"/> Other (Specify)		20b. PLACE OF DISPOSITION (Name of cemetery, crematory, or other place) Klamath Memorial Park	
21a. SIGNATURE OF FUNERAL SERVICE LICENSEE OR PERSON ACTING AS SUCH <i>William J. Davenport</i>		21b. LICENSE NUMBER (Of License) 47 3104	
22. NAME, ADDRESS AND ZIP OF FACILITY Davenport's Chapel of the Good Shepherd, 6420 South Sixth St., Klamath Falls, Oregon 97603-7194		23. TIME OF DEATH 09:30 AM	
24. WAS MEDICAL EXAMINER NOTIFIED? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		25. DATE SIGNED (Month, Day, Year) July 7, 1988	
26. NAME, TITLE, ADDRESS AND ZIP OF CERTIFYING PHYSICIAN (Type or Print) Everett E. Howard, MD, 2622 Campus Drive, Klamath Falls, Oregon 97601		27. DATE PROMOUNCED DEAD (Month, Day, Year) July 7, 1988	
28. On the basis of examination and/or investigation, in my opinion death occurred at the time, date, place and due to the cause(s) stated. (Signature) <i>Everett E. Howard</i>		29. DATE SIGNED (Month, Day, Year) July 7, 1988	
30. NAME OF ATTENDING PHYSICIAN OR OTHER THAN CERTIFIER (Type or Print) Everett E. Howard, MD, 2622 Campus Drive, Klamath Falls, Oregon 97601		31. NAME OF ATTENDING PHYSICIAN OR OTHER THAN CERTIFIER (Type or Print) Everett E. Howard, MD, 2622 Campus Drive, Klamath Falls, Oregon 97601	
32. IMMEDIATE CAUSE (ENTER OR TYPE CAUSE (SEE LINE FOR (a), (b), and (c)) Do not enter mode of dying, e.g. Cardiac or Respiratory Arrest ACUTE MYOCARDIAL INFARCTION		33. AUTOPSY <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
34. IF YES, were findings considered in determining cause of death?		35. MANNER OF DEATH <input checked="" type="checkbox"/> Natural <input type="checkbox"/> Pending investigation <input type="checkbox"/> Accident <input type="checkbox"/> Suicide <input type="checkbox"/> Undetermined <input type="checkbox"/> Homicide	
36. DATE OF INJURY (Month, Day, Year)		37. TIME OF INJURY	
38. PLACE OF INJURY - At home, farm, street, factory, office building, etc. (Specify)		39. LOCATION (Street and Number or Rural Route Number, City or Town, State)	
37. REGISTRAR'S SIGNATURE <i>Michelle Bostell</i>		38. DATE FILED (Month, Day, Year) JUL 8 1988	
39. DID DECEASED REPRESENT YEARS? <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A		40. WAS GIFT MADE? <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A	

THIS IS A TRUE AND EXACT REPRODUCTION OF THE DOCUMENT OFFICIALLY REGISTERED AT THE OFFICE OF THE KLAMATH COUNTY REGISTRAR.

45-2 REV. 1-57

DATE ISSUED **JUL 8 1988**

Marian Ackerman
MARIAN ACKERMAN
COUNTY REGISTRAR
KLAMATH COUNTY, OREGON

STATE OF OREGON: COUNTY OF KLAMATH: **SS**

Filed for record at request of **Aspell, Della-Rose** the **26th** day of **June** A.D. 19 **89** at **4:42** o'clock **P.M.**, and duly recorded in Vol. **M89** of **Deeds** on Page **11419**.

Evelyn Biehn County Clerk

By *Pauline M. Anderson*

FEE \$8.00
Return: Aspell, Della-Rose
122 S. 5th St., Klamath Falls, Or. 97601