| 11: 4 | 487 | | | Vol. <u>m89</u> F | age 16112 |
|------------|----------------------|------------------|--------------------------------------|---------------------------|------------------|
| KNC | W ALL MEN BY | THESE PRESE | NTS, That I, | em J. Pine and An | n J. Pine |
| have made, | constitut | pointed and by t | ese pirsents do make ynné llartin | e, constitute and appoint | |
| my true an | d lawful attorney, i | for me and in my | name, place and stea | d and for my use and be | |
| make | any necessary | legal decisio | ns in our behalf | , and sign any | |
| nece | ssary documents | s in our abser | ce. | | |
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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.

Deted F 25 19 579. STATE OF OREGON, County of KIA Math) ss. Personally appeared the above named Mon J. Rine Izm J. line and acknowledied the foregoing instrument to be voluntary act and deed. (m, 1 Before me: ... Notary Rublic for Oregon. My commission expires 5-39-40 (OFFICIAL SEAL) STATE OF OREGON, POWER OF ATTORNE! SS. County of Klamath 17 (FORM No. 15) I certify that the within instrument was received for record on the 28th day of Aug. 19.89, at 3:20 o'clock ... PM., and recorded in book/reel/volume No._____M89____, on page 16112 or as fee/file/instruто EPACE RESERVED ment/microfilm/reception No. 4487, FOR Record of Power of Attorney RECORDER'S USE of said County. Witness my hand and seal of AFTER RECORDING RETURN TO County affixed. Ann J. Pine Evelyn Biehn, County Clerk 2441 Unity NAME Klamath Falls, Or. By Qaulene Mullonde Deputy NAME, ADDRESS, ZIP Fee_\$5,00 cc 1.00