STEVENS NESS Vol. mg Page 19565 FORM No. 15-POWER OF ATTORNEY KNOW ALL MEN BY THESE PRESENTS, That I, UMML ĭΚ have made, constituted and appointed and by these presents do make, constitute and appoint Caclus Phillips my true and lawful attorney, for me and in my name, place and stead and for my use and benefit, to enroll Som Jay Oge in school & permission for medical Allentin 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, In construing this instrument and where the context so requires, the singular includes the plural. by virtue hereof. 105-71 _____, 19 89. Dated 101/ a cla the <u>Oct. 10</u>, 1989 STATE OF OREGON, County of <u>Academites</u>) ss. Personally appeared the above named <u>WYNNE CLANCEY</u> (.... yoluntary act and deed. and acknowledged the foregoing instrument to be Kintecher KIMBERLEY KAY CRISMAN Notary Public for Oregon. My commission expinite MUTARY PUBLIC OREGON Before me: 7-25-93 My Commission Expires (OFFICIAL SEAL) STATE OF OREGON. SS. County ofKlamath POWER OF ATTORNEY I certify that the within instru-(FORM No. 15) ment_was received for record on the 16th. day of _______ 0ct._____, 19_89., at .8:34 o'clock .A.M., and recorded in page _____19565 or as fee/file/instrument/microfilm/reception No. 6454, SPACE RESERVED Record of ______ Power of Attorney TO FOR RECORDER'S USE of said County. Witness my hand and seal of County affixed. AFTER RECORDING RETURN TO Evelyn Biehn, County Clerk Eaduard Phillips NAME By Queline Musender Deputy 429 N. 2nd St. Klamath Falls, Or, 97601 Fee \$5.00 NAME, ADDRESS, ZIP

5.00