Vol. <u>m98</u> Page_ 6320 FORM No. 15-POWER OF ATTORNEY. 13225 TK Donald E. Mc Adams, Sr. KNOW ALL MEN BY THESE PRESENTS, That I, have made, constituted and appointed and by these presents do make, constitute and appoint LLC. R. SCH FOCIEF my true and lawful attorney, for me and in my name, place and stead and for my use and benefit, to for the care and custody of Donald E. M. Adams, Jr. 2345 Marina Dr. Klamath Falls OR 97601 and the establishment of a parent/child 52 relationship. co 3 **PH** giving and granting unto my said attorney full power and authority to do and perform all and every act and thing ŝ what over 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. Datel 6 42216 , 19 90. I mall E. M. Calans SI. 6 APRIL , 19 90 STATE OF OREGON, County of KLANATH) ss. Fleisonally appeared the above named DONALD E. MADANS voluntary act and deed. and acknowledged the foregoing instrument to be Potary Public for Oregon. My commission expires 9-13-91 Elefore me: LOP FICIAL SEALS 21.08% STATE OF OREGON, County ofKlamath POWER OF ATTORNEY I certify that the within instru-(FORM No. 15) ment was received for record on the 6th.________ April_____, 19_90, at 8:52 o'clock A.M., and recorded in book/reel/volume No. M90 , on page 6320 or as fee/file/instru-то WACE RESERVED Record of Power of Attorney FOR RECORDER'S USE of said County. Witness my hand and seal of County affixed. AFTER RECORDING HETURN TO Evelyn Biehn, County Clerk Lea R. Schroder TITLE 2345 Marina Dr. By Daulina Multendor Deputy Klamath Falls OR Fee \$5.00 NAME, ADDREDS, ZIP 1.00 cc 5.00