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RECORDING REQUESTED BY

Vol. m90 Page 19817

AND WHEN RECORDED MAIL TO

RON AND SHARRON FREDRICKS
P.O. BOX 5146
KLAMATH FALLS, OR
97601

SPACE ABOVE THIS LINE FOR RECORDER'S USE

POWER OF ATTORNEY (Special)

KNOW ALL MEN BY THESE PRESENTS:

That DIANA MCDONALD

City of REDDING, of 327 SPRINGER DR.

County of SHASTA

State of California, here by appoint(s) RON AND SHARRON FREDRICKS

of P.O. Box 5146

City of KLAMATH FALLS

County of OREGON

State of California, as MY attorney in fact

to act in MY name and to do any and all of the following: TO ACT ON MY BEHALF CONCERNING ALL MATTERS TO DO WITH MY DAUGHTER, SHANNON MCHILLIE MCDONALD FOR HER BEST INTEREST FROM SEPTEMBER 24, 1990 THROUGH JANUARY 15, 1991.

(Granting to MY attorney in fact full power and authority to do and perform all and every act and thing whatsoever requisite, necessary, and proper to be done in the exercise of any of the rights and

powers herein granted, as fully to all intents and purposes as I might or could do if personally present, with full power of delegation substitution or revocation, hereby ratifying and

confirming all that MY attorney in fact, or his substitute or substitutes, shall lawfully do or cause to be done by virtue of this power of attorney and the rights and powers herein granted.

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By executing this document I further intend to revoke all previous general power of attorney appointments executed by me or on my behalf to the extent that they authorize any of the same acts herein specified.

IN WITNESS WHEREOF I have hereunto signed *MY* names(s) this 24th day of SEPTEMBER, 1990

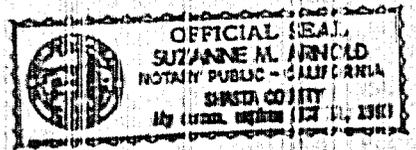
Diana McDonald
Signature

.....
Signature

STATE OF CALIFORNIA
COUNTY OF SHASTA

On this 24 day of September in the year 1990 before me Suzanne *M. Arnold*, a Notary Public, State of California, duly commissioned and sworn, personally appeared Diana McDonald, personally known to me (or proved to me on the basis of satisfactory evidence) to be the person..... whose name is subscribed to the within instrument, and acknowledged to me that..... she..... executed the same.

IN WITNESS WHEREOF I have hereunto set my hand and affixed my official seal in the City of Redding County of Shasta on the date set forth above in this certificate.



Suzanne M. Arnold
Notary Public, State of California
My commission expires 10-11-93

STATE OF OREGON: COUNTY OF Klamath: ..
Filed for record at request of _____ the 1st day
of SEP A.D. 1990 at 1:26 o'clock P.M., and duly recorded in Vol. M90
of _____ on Page 19817
of _____
Evelyn Biehn - County Clerk
By Daniel M. ...

FEE \$10.00
cc 1.50

Date
Address

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