

STATE OF \_\_\_\_\_ )  
COUNTY OF \_\_\_\_\_ ) ss  
Witness my hand and Official Seal.

I hereby certify that the within instrument was  
filed for record in \_\_\_\_\_ Klamath County,  
State of \_\_\_\_\_ Oregon

No. \_\_\_\_\_  
Book M91 Page 1337  
Power of Attorney  
Date January 22, 1991  
Request of: Elizabeth Slaughter

Indexed Paged Blotted

Evelyn Biehn, County Clerk

By Annetha Shetch  
Deputy

\$5.00 CC \$1.00  
Fee

When recorded, mail to:

## GENERAL POWER OF ATTORNEY

(DURABLE)

KNOW ALL MEN BY THESE PRESENTS that I (we) Elizabeth Ann Slaughter, the undersigned

principal(s), whose address is 2420 Eberlein Ave. KIAMATH FALLS Oregon 97601, by this instrument,

hereby constitute and appoint Ruth E. Buhle, whose address is, 1554 Dayton Street Klamath Falls Oregon 97603 as my (our) Attorney-In-Fact to act in my (our) name, place and stead and for my (our) use and benefit as if I (we) were personally present to accomplish the same.

I (we) specifically authorize, although not limited thereby, my above named Attorney-In-Fact to:

- ask, collect, demand, receive, recover and sue for all such sums of money, debts, accounts, legacies, bequest, interest, dividends, annuities and demands whatsoever as are now, or shall hereafter become due, owing, payable or belonging to me (us); to have, use, and take all lawful ways or means necessary to grant acquittance or other sufficient discharges for the same;
- bargain, contract, purchase, receive, sell, possess, convey, transfer, lease, let demise, remise, assign, release, encumber, hypothecate, mortgage or otherwise exercise any property rights in any and all types, kinds and descriptions of both real and personal property, in lands, tenements, hereditaments, attachments, equipment, goods, wares, choses in action, personality or other property in possession or in action;
- sign, seal, deliver, or otherwise executes and/or acknowledge any agreement, bottomry, bill, bill of lading, bond, charter, contract, covenant, deed, debt instrument, demand, indenture, judgement, note, notice, pledge, protest, receipts, release, Satisfaction of Mortgage or any other such instruments in writing as may be necessary or proper to fully accomplish these premises;
- deposit, withdraw, pledge or otherwise collect, recover or hypothecate any and all monies held in my (our) name in any Bank, Savings and Loan Association, Trust Company, Thrift Company, Loan Company, Brokerage Firm, Insurance Company or any other Financial Institution, or an Individual or Firm acting in a Fiduciary Capacity in regards to any such monies now due, owing, payable or otherwise belonging to me (us);
- exercise any rights, options or privileges available to me (us) under or in connection with any Annuity Contract, Disability award, Accumulated Retirement Contract or Life Insurance Policy, including, but not limited to, the right to amend, change or modify the manner, method, or frequency of payments under such contract, and to surrender, pledge or change the beneficiary under any such Life Insurance Policy or Policies;
- invest and reinvest my (our) money in any debt or equity security, such as, stocks, Bonds, Debentures, Joint ventures, Limited Partnerships or Contract Services;

GIVING AND GRANTING unto said Attorney-In-Fact, full power and authority to transact any business, perform every act and thing whatsoever requisite and necessary to fully accomplish the intents and purposes of this Power of Attorney, and therefore, I (we) hereby ratify and confirm every act that said Attorney-In-Fact shall Lawfully do or cause to be done by virtue of these presents.

The validity of this Power of Attorney shall not be affected by my (our) subsequent disability or incapacity as recognized under the applicable State Laws, and shall continue in full force and effect during my (our) lifetime, unless sooner revoked or terminated by me (us) in writing.

IN WITNESS WHEREOF, I (WE) have hereunto set my (our) hand(s) this Seventeenth day of

Jan., 19 91  
Elizabeth Slaughter  
Principal

Principal:

### ACKNOWLEDGEMENT

State of Arizona  
County of Maricopa

This POWER OF ATTORNEY was acknowledged before me, the undersigned Notary Public, this 17th day of

January, 19 91, by Elizabeth A. Slaughter  
My Commission Expires January 22, 1993  
KATHY A. COLTON  
Notary Public

1986, ALPHA ENTERPRISES OF ARIZONA — P.O. Box 28326, Phoenix, AZ 85026 FORM 131  
My Comm. Expires Sept. 1, 1993

Return to  
Ruth E. Buhle  
P.O. Box 1564  
Klamath Falls, OR 97601

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