## FORM No. 15-POWER OF ATTORNEY.

**™33503** 

KNOW ALL MEN BY THESE PRESENTS, That I, Kathy Rotz Songarectien Auring power of atterney to have made, constituted and appointed and by these presents do make, constitute and appoint (Witter and Davana Cullectson, To Mccure wower of attorney 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 Edward M. Kotz 3930 La Marada Way Klamath falls, Oregon 97603 The thand parents of Edward M. Kots

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.

athy Kots Jonganecker STATE OF OREGON, County of K (cema 4) ss. This instrument was acknowledged before me on ...... Quequest Some , 1991. by Kiekhy Kott Longanecker Notary Public for Oregon My commission expires .... **POWER OF ATTORNEY** STATE OF OREGON, (FORM No. 15) County of ......Klamath I certify that the within instru-Kathy Longanes Ker ment was received for record on the 20th . day of . at 1:02 ... o'clock P.M., and recorded in book/reel/volume No.\_\_\_\_\_\_\_\_, on то page ... 16590 ..... or as fee/file/instru-CE RESERVED Walter Culbertson ment/microfilm/reception No. 33503 FOR Record of ... Power of Attorney RECORDER'S USE of said County. Barbara (""IberTson Witness my hand and seal of AFTER RECORDING RETURN County affixed. Barbara Culbertson 3930 Las marada Evelyn Biehn, County Clerk NAME TITLE Klamath Fails OR 97603 By Dauline Mulinday Deputy NAME, ADDRESS, ZIP Fee \$5.00 cc 1.00