

DELEGATION OF POWERS

STATE OF

County of

) ss:

I, Yvonne M. Reeves being duly sworn, depose and say:

I am the custodial parent or legal guardian of _____

David Cee James Reeves

ages 8 yrs, a minor(s) and pursuant to ORS

126.030, I hereby grant full custody and control of said

child(ren) to: Delores and John Buttler

to act with full authority regarding any matter concerning the care, custody, or property of said child; to act as I/we would act, including but not limited to: granting of consent for any medical, dental, psychosocial, psychiatric examinations, care, or treatment including vaccinations or immunizations; enrollment in school and participation in school activities; applying for public benefits; and any other matter regarding the health or welfare of said child(ren) except: the power to consent to the marriage or adoption of said child(ren) and _____

This power of attorney shall be valid for a period ending _____

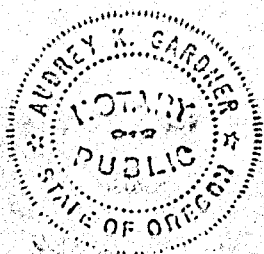
_____ but in no case for more than 180 days.

I/we reserve the power to terminate this authority at any time.

Signed: Yvonne Marie Reeves

SUBSCRIBED AND SWORN to before me this 22nd day of October, 1992.

Audrey K. Gardner
NOTARY PUBLIC FOR OREGON
My Commission expires: 6-11-93



Return: Delores Buttler
P.O. Box 558
Bly, Or. 97622

STATE OF OREGON: COUNTY OF KLAMATH: ss.

Filed for record at request of Dolores Buttler the 22nd day of Oct. A.D., 19 92 at 11:14 o'clock A.M., and duly recorded in Vol. M92, of Power of Attorney on Page 24749.

Evelyn Biehn, County Clerk

By Audrey K. Gardner

FEE \$5.00
cc 2.00