The rice with the

STATE OF OREGON. GENERAL County of ..... **POWER OF ATTORNEY** I certify that the within instrument was received for record on the ...... day ....., 19....., at .......... o'clock ......M., and recorded in PACE RESERVED book/reel/volume No..... on page FOR ..... and/or as tee/file/instrument/microfilm/reception No....., Record of ...... of said County. Witness my hand and seal of After recording return to (Name, Address, Zip): County affixed. Mickie Duval P.O. BOX 173 Midland, OR 97634



(14) In connection with any of the powers herein granted, to sign, make, execute, acknowledge and de	eliver in
my name any and all deeds, contracts, bills of sale, leases, promissory notes, drafts, acceptances, evidences	of debt,
obligations, mortgages, pledges, satisfactions, releases, acquittances, receipts, bonds, writs and any and all othe	
ments whatsoever, with such general or special agreements and covenants, including those of warranty, a	is to my
attorney may seem right, proper and expedient;	

(15) To employ, pay and discharge any person, including counsel and attorneys in connection with the exercise of any of the foregoing powers;

(16) To complete, amend, execute, and deliver any tax return or form of any nature whatsoever; to pay any tax due or collect any tax refund due; to make and respond to lawful inquiries from any taxing authority in connection with any power granted herein;

है है जब के और नेतरियुक्त में दिवस्तर के हो देश के अवस्थित है है है

(17)

(18) Generally to conduct, manage and control all my business and my property, wheresoever situated, as my attorney may deem for my best interests, hereby releasing all third persons from responsibility for the acts and omissions of my attorney;

I hereby give and grant unto my attorney full power and authority freely to do and perform every act and thing whatsoever requisite and necessary to be done in and about the premises, as fully to all intents and purposes, as I might or could do it personally present, hereby ratifying and confirming all that my attorney shall lawfully do or cause to be done by virtue hereof.

In construing this power of attorney, it is to be understood that the undersigned may be more than one person or a corporation, and where the context so requires, the singular includes the plural and all grammatical changes shall be implied to make the provisions hereof apply equally to corporations and to individuals.

This power shall take effect: (delete inapplicable phrase)

a) on the date next written below;

b) if given by an individual, on the date that individual shall be adjudged incompetent by a court of proper jurisdiction.

My attorney and all persons unto whom these presents shall come may assume that this power of attorney has not been revoked until given actual notice either of such revocation or of my death.

IN WITNESS WHEREOF, I have signed this instrument, or if a corporation, caused its name to be signed and its seal, if any, affixed by an officer or other person duly authorized to do so by order of its board of directors, on this 12th day of May 19

> STATE OF OREGON, County of Klamath This instrument was acknowledged before me on .....

This instrument was acknowledged before me on .....

OFFICIAL SEAL SHIRLEY J. DRUMM NOTARY PUBLIC-OREGON COMMISSION NO. 006078

by Patsy Jane Atkison

Doubleme Mullende

STATE OF OREGON: COUNTY OF KLAMATH:

Filed	for record	at request	of		atsy Jane	Atkiso	n	the	12t1	h	day
of		May	A.D., 19	93 at	10:43	o'clock _	A_M., and	duly recorded	l in Vol	м93	
			of				on Page 105			1.1	
						Eve	lyn Biehn	County 6	Clerk	- 1	

**FEE** \$10.00 1.50