08-10-93A09:49 RCVD

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DELEGATION OF POWERS

DELEGATION OF FORERS	
STATE OF)	
Klamath) ss: County of)	
-	- 4
I,Belinda_Hotzbeing duly sworn, depose a	na
say:	
I am the custodial parent or legal guardian of	
Amber marie Frazier	
ages <u>5 Years</u> , a minor(s) and pursuant to ORS	
126.030, I hereby grant full custody and control of said	
child(ren) to: Rod and Dale Kenton	
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, physchological, psychiatric examinations, care or treatment including vaccinations or immunizations; enrollmer 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	it e
This power of attorney shall be valid for a period ending $\overline{JAN.1994}$ but in no case for more than 180 days.	
I/we reserve the power to terminate this authority at any time	\geq
signed: Belinda 40th	5
SUBSCRIBED AND SWORN to before me this Standay of JUCY	,
19 <u>93</u> .	
NOTARY PUBLIC FOR OREGON	2
OFFICIAL SEAL JOHN F. OBEDOWSKI NOTARY PUBLIC- OREGON COMMISSION NO. CO4238 MY COMMISSION EXPRES JAN 24, 1995	<u> </u>
Rød Kenton 2409 Applegate KF-0 97601	
ATE OF OREGON: COUNTY OF KLAMATH: ss.	
ed for record at request of <u>Rod Kenton</u> the <u>10t</u> Aug. A.D., 19 <u>93</u> at <u>9:49</u> o'clock <u>AM.</u> , and duly recorded in Vol. M	h
Aug. A.D., 19 93 at 9:49 o'clock AM., and duly recorded in Vol. M of Power of Attorney on Page 19764	7_7
ofFower of Actorney In g	
- \$5.00 By Dauderi C. Yurdenda	<u></u>

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