FORM No. 15-POWER OF ATTORNEY. 03-15-94A09:41 RCVD VOLY 94 Page 7800 7524 KNOW ALL MEN BY THESE PRESENTS, That I, ..... Oma... Syvilla... Mckee..... have made, constituted and appointed and by these presents do make, constitute and appoint .....Phyllis Darlene-McCollam my true and lawful attorney, for me and in my name, place and stead and for my use and benefit, to Make Medical and health Decisions Cash or deposit any checks or sums of money addressed to me in my name Make all decisions concerning the care of me if I can not make the decision Make and perform all and every act and thing whatsoever requiste and necessary to be done in my (Oma Syvilla Mckee) best interest. In the event Phyllis Darlene McCollam can not carry out this duty. I appoint my grand daughter Susan D. Carter to abide by this order. 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, In construing this instrument and where the context so requires, the singular includes the plural. GPPICIAL SEAL CYNTHA G. STANEY NOTARY PUBLIC - OREGON COMMISSION HO, 029622 MY COMMISSION EXPRES JAN 28, 1998 ublic for Oregon My commission expires 1-28 POWER OF ATTORNEY (FORM Ne. 15) STATE OF OREGON. County of .....Klamath SS. -----Oma-Syvilla-Mckee I certify that the within instrument was received for record on the ..... at 9:41 o'clock A.M., and recorded in τn Phyllis Darlene McCollam SPACE RESERVED ment/microfilm/reception No. 77524, FOR Alternate: Susan D. Carter Record of .... Power of Attorney RECORDER'S USE of said County. AFTER RECORDING RETURN TO Witness my hand and seal of Phyllis Darlene McCollam County affixed. P.O. Box 323 Evelyn Biehn, County Clerk merrill OK 97633 NAME, ADDRESS, ZIP B Queline Mulinglere Deputy Fee\_\$5.00 5.00 , ovec cc's 2.00