RECORDER'S USE

and/or as fee/tile/instrument/microfilm/reception No.______

County affixed.

Witness my hand and seal of

AFF Selding

After recording return to (Name, Address, Zip):

Klamath Falls, OR. 97603

3938 LaMarada Way

(14) In connection with any of the powers herein granted, to sign, make, execute, acknowledge and deliver 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 other instruments whatsoever, with such general or special agreements and covenants, including those of warranty, as to my

(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

(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

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

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My attorney and all persons unto whom these presents shall come may assume that this power of attorney has not been revoked until given actual notice either of such revocation or of my death.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 it a corporation, caused its name to be signed

STATE OF OREGON, County of KLAMH TM) ss.

This instrument was acknowledged before me on APRIC 26 , 1994, by CHARLES LOUIS KENNEDY OFFICIAL SEAL
JUDITH L CALDWELL
NOTARY PUBLIC - OREGON
COMMISSION NO. 007230
MY COMMISSION EXPIRES AUG. 31, 1993 Notary Public for Oregon My commission expires

STATE OF	OREGON:	COUNTY	OF KI	AMATH.	

Filed 1	or record at	request of Elaine Kennedy	
of	May	A.D., 19 94 at 1:26 o'clock P M and duly and the 2nd	day
		on Page 13/01	 ,
FEE	\$10.00	Evelyn Biehn County Clerk By Courters Walth	
		By Grant Grant William 1 1	