My commission	expires	
:	STATE OF OREGON. County of	
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	Witness my hand and seal o	
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Á	SERVICE SERVICES SERVICES SE	E SE	I SECRETARIO PER
8	State of California	_	
	County of Siskiyou		·
NO N	On December 13, 1994	_ before me,	THE UNDIRSIGNED
}			and Don L. Hilton****************
	personally known to me -	OR - ☐ prov	NAME(STOF SIGNIFIES) VEO to me on the basis of satisfactory evidence 1) be the person(*) whose name(*) is/are subscribed to the within instrument and
	MARSHA L. GRIF COMM. #1016.9 NOTARY PUBLIC — CA. IF SISKIYOU COUNT Y MY COMM. EXP. FEB. 13,	FFI V 8	knowledged to me that he/she (he) executed the same in his/her (their) authorized apacity(ies), and that by his/her (their) a gnature(s) on the instrument the person(s), the entity upon behalf of which the person(s) acted executed the instrument.
\$73	Trough the data halour is not conviced by	**: ***: OPT !	MONAL WITNESS my hand and official seal. SI MATURE OF NOTARY MONAL
fre			valuable to persons relying on the document and could prevent
	CAPACITY CLAIMED BY SIGN	IE R	DESCRIPTION OF ATTACHED DOCUMENT
I_	CORPORATE OFFICER		appt of Lucessor Truck
	PARTNER(S) LIMITED		TILE OF TYPE OF DOCUMENT
]	TRUSTEE(S) GUARDIAN/CONSERVATOR		NUMBER OF PAGES 12-13-94 DATE OF DOCUMENT
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