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01-06-95P(3:53 RCVE

RECORDING REQUESTED BY

Vol. 195 Page 468

AND WHEN RECORDED MAIL TO:

NAME Cathryn B. Morse
 STREET ADDRESS 21800 Madoc Pl. Rd.
 CITY, STATE & ZIP CODE Chiloquin, OR 97604
MTN 34359 N. K.

SPACE ABOVE THIS LINE FOR RECORDER'S USE

POWER OF ATTORNEY - GENERAL

[includes optional DURABLE POWER OF ATTORNEY]

KNOW ALL PERSONS BY THESE PRESENTS: That I, CATHRYN BARRETT CRAMER MORSE

the undersigned (jointly or severally, if more than one) hereby make, constitute and appoint WILLIAM P. BRANDSNESS,
411 PINE STREET, KAMATH FALLS, (OREGON 97601)

my true and lawful Attorney for me and in my name, place and stead and for my use and benefit:

(a) To ask, demand, sue for, recover, collect and receive each and every sum of money, debt, account, legacy, bequest, interest, dividend, annuity and demand (which now is or hereafter shall become due, owing or payable) belonging to or claimed by me, and to use and take any lawful means for the recovery thereof by legal process or otherwise, and to execute and deliver a satisfaction or release therefor, together with the right and power to compromise or compound any claim or demand;

(b) To exercise any or all of the following powers: as to real property, any interest therein and/or any building thereon: To contract for, purchase, receive and take possession thereof and of evidence of title thereto; to lease the same for any term or purpose, including leases for business, residence, and oil and/or mineral development; to sell, exchange, grant or convey the same with or without warranty; and to mortgage, transfer in trust, or otherwise encumber or hypothecate the same to secure payment of a negotiable or non-negotiable note or performance of any obligation or agreement;

(c) To exercise any or all of the following powers: as to all kinds of personal property and goods, wares and merchandise, choses in action and other property in possession or in action: To contract for, buy, sell, exchange, transfer and in any legal manner deal in and with the same, and to mortgage, transfer in trust, or otherwise encumber or hypothecate the same to secure payment of a negotiable or non-negotiable note or performance of any obligation or agreement.

(d) To borrow money and to execute and deliver negotiable or non-negotiable notes therefor with or without security; and to loan money and receive negotiable or non-negotiable notes therefor with such security as he/she shall deem proper;

(e) To create, amend, supplement and terminate any trust and to instruct and advise the trustee of any trust wherein I am or may be trustee or beneficiary; to represent and vote stock, exercise stock rights, accept and deal with any dividend, distribution or bonus, join in any corporate financing, reorganization, merger, liquidation, consolidation or other action and the extension, compromise, conversion, adjustment, enforcement or foreclosure, singly or in conjunction with others of any corporate stock, bond, note, debenture or other security; to compound, compromise, adjust, settle and satisfy any obligation, secured or unsecured, owing by or to me and to give or accept any property and/or money whether or not equal to or less in value than the amount owing in payment, settlement or satisfaction thereof;

(f) To transact business of any kind or class and as may be necessary or proper in the premises, to sign, execute, acknowledge and deliver any deed, lease, assignment of lease, covenant, indenture, indemnity, agreement, mortgage, deed of trust, assignment of mortgage or of the beneficial interest under deed of trust, extension or renewal of any obligation, subordination or waiver of priority, hypothecation, bottomry, charter-party, bill of lading, bill of sale, bill, bond, note, whether negotiable or non-negotiable, receipt, evidence of debt, full or partial release or satisfaction of mortgage, judgment and other debt, request for partial or full reconveyance of deed of trust and such other instruments in writing of any kind or class as may be necessary or proper in the premises.

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THIS FORM IS NOT VALID FOR HEALTH CARE DECISIONS.
 (Use Wolcott's Form 1401 for that purpose.)

WOLCOTT'S FORM 1400 - POWER OF ATTORNEY - GENERAL
 (includes optional DURABLE POWER OF ATTORNEY), Rev. 3-94

(When 1553 3A)

Before you use this form, read it, fill in all blanks, and make whatever changes are appropriate and necessary to your particular transaction. Consult a lawyer if you doubt the form's fitness for your purpose and use. Wolcott's makes no representation or warranty, express or implied, with respect to the merchantability or fitness of this form for an intended use or purpose.

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- (g) [Strike if not applicable.] The ~~power of Attorney~~ shall not be affected by subsequent incapacity of the principal and shall remain in effect for a period of ~~xxxxxx~~ xxxxxx years after the disability or incapacity occurs.
- (h) [Strike if not applicable.] The ~~power of Attorney~~ shall terminate if the principal becomes incapacitated or incompetent and shall not be effective for a period of ~~xxxxxx~~ xxxxxx years after the disability or incapacity occurs.
- (i) If (g) and/or (h) are not stricken the following warning applies.

WARNING TO PERSON EXECUTING THIS DOCUMENT:

This is an important legal document. It creates a durable power of attorney. Before executing this document, you should know these important facts:

1. This document may provide the person you designate as your attorney in fact with broad powers to manage, dispose, sell, and convey your real and personal property and to borrow money using your property as security for the loan.
2. These powers will exist for an indefinite period of time unless you limit their duration in this document. These powers will continue to exist notwithstanding your subsequent disability or incapacity.
3. You have the right to revoke or terminate this power of attorney.
4. If there is anything about this form that you do not understand, you should ask a lawyer to explain it to you.

GIVING AND GRANTING unto my said Attorney full power and authority to do and perform all and every act and thing whatsoever requisite, necessary or appropriate to be done in and about the premises as fully to all intents and purposes as I might or could do if personally present, hereby ratifying all that my said Attorney shall lawfully do or cause to be done by virtue of these presents. The powers and authority hereby conferred upon my said Attorney shall be applicable to all real and personal property or interests therein now owned or hereafter acquired by me and wherever situate.

My said Attorney is empowered here / to determine in his/her sole discretion the time when, purpose for and manner in which any power herein conferred upon him/her shall be exercised, and the conditions, provisions and covenants of any instrument or document which may be executed by him/her pursuant hereto; and in the acquisition or disposition of real or personal property, my said Attorney shall have exclusive power to fix the terms thereof for cash, credit and/or property, and if on credit with or without security.

When the context so requires, the masculine gender includes the feminine and/or neuter, and the singular number includes the plural. This power of attorney will expire midnight of February 15, 1995.

WITNESS my hand this 4 day of January, 1995.

Cathryn C. Morse
CATHRYN C. MORSE

STATE OF California

COUNTY OF Orange

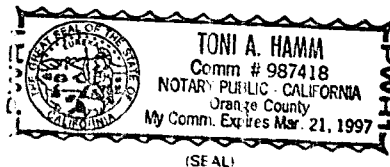
On January 4, 1995 before me, Toni A. Hamm
(DATE) (NAME, TITLE OF OFFICE (i.e. "JANE DOE, NOTARY PUBLIC"))

personally appeared Cathryn C. Morse
(NAME OF SIGNER(S))

personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Toni A. Hamm
(SIGNATURE OF NOTARY)



(SEAL)

THIS FORM IS NOT VALID FOR HEALTH CARE DECISIONS. (Use Welfare's Form 1401 for that purpose.)

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STATE OF OREGON: COUNTY OF KLAMATH: ss.

Filed for record at request of Mountain Title Co the 6th day of Jan A.D., 19 95 at 3:53 o'clock P.M., and duly recorded in Vol. M95 of Power of Attorney on Page 468.

FEE \$10.00

Berneth G. Letsch County Clerk

By Dorene Mullendorfer