\$5.00/CC1.00 1038 High St K Falls.or 97601

98044

VOI MOS PAGE 8863

STATE OF OREGON,		)					
County ofKlan	nath	} ss.					
I, the undersigned	d, being first duly s	vorn, hereby sa	y and certify:				
1. I am a parent c	or legal guardian of t	he minor child,	ward or incapa	citated pers	on whose name	appears bel	ow.
2. With respect delegate to Ramo	to the powers vesterna Royal	d in me regar	ding care, cust	ody or prop	erty of that pe	rson, I here	e <i>by</i>
the following power(s)		•		± 1	***************************************		******
☐ A. All such	powers.				-		
☒ B. Only th	e following powers(	s):					
In the event	that Catherine that Catherine rom Betty Simme	Strickland					
If neither (A) nor (B)	is checked above, th	is instrument s	hall delegate a	ll such powe	rs.	-	
on the10th day  4. This delegation  DATED this10th	n is made pursuant :	, 1 to ORS 126.030	995, and sha, 19.95	II include bo	th of those date  a. Strickland	es.*	end 
Betty Simmerman							
Name of Parent/Guardian (print	)						
SUBSCRIBE	O AND SWORN TO	before me this	10 14	iay of	April	, 19.2	_یج
NC.	OFFICIAL SEAL LOREY X. GARDNER PARY PUBLIC-OREGON MMISSION NO. 023239 MISSION EXPINITY JUN. 11, 1	907	Notary Public to My commission		Gard 6-11-	new 9 Tag	
ORS 126.030 allows a paren months, any powers of the consent to marriage or adop delegation of power is made	parent or guardian re- tion of the minor ward to a school administrat	erding care, cust This length of t	ody or property ime may be exte	of the minor	thild or ward exc	ent the name	r to
STATE OF OREGON: COU	NTY OF KLAMATH:	ss.					
filed for record at request of	Ca _A.D., 19 <u>95</u> at	therine Str	ickland 'clock P	M., and duly r	the ecorded in Vol.		_ day
APTII 0	fPower_of_	Attorney	on Pag	ge8863	· · · · · · · · · · · · · · · · · · ·		
EE RETURN Cath	erine Stricklan	đ	By Jaga	La de la companya de	Lelsch, County (		