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DELEGATION	OF POWERS	OF PARENT	OR GUARDIAN

	OWERS OF PAREITI OR GUARDIAN
STATE OF OREGON,)
County of Klamath	
I, the undersigned, being first duly swor	n, hereby say and certify:
1. I am a parent or legal guardian of the	minor child, ward or incapacitated person whose name appears below.
delegate to	in me regarding care, custody or property of that person, I hereby
the following power(s) (choose exactly one):	
A. All such powers,	
☐ B. Only the following powers(s):	
If neither (A) nor (B) is checked above, this	
3. This delegation shall commence on the	he, 19.75. and end, 19.75. and end, 19.75. and shall include both of those dates.*
4. This delegation is made pursuant to	
DATED this day of 5 Ept NEW A	19/4
1. 6. 10.1	⊢
	Fabiola Bonzoles
Signature of Parent/Guardian	Name of Child, Ward or Incapacitated Person (print)
Cristina mata	
Name of Parent/Guardian (print)	************
	0
SUBSCRIBED AND SWORN TO be	fore me this day of Destiniler 1995
	0 700
A COPERATION OF THE PARTY OF TH	Devel (Mar
BEVERLY A. MOORE NOTARY PUBLIC - OREGON	Notary Publicator Oregon
MY COMMISSION NO. A 031112 MY COMMISSION EXPIRES FEB. 01 1998	My commission expires:
	r incapacitated person to delegate to another person, for a period not exceeding 6 ing care, custody or property of the minor child or ward, except the power to
anogueton of power is made to a school administrator.	his length of time may be extended to a period not exceeding 12 months if the
* If this delegation is to be effective for a single date of	only, insert that date in both spaces provided.
0 - 1	
Return 435 Hillside State of Oregon: county of Klamath:	Carma Marchail
	rma Marshall the 11th day
of <u>Sept</u> A.D., 19 <u>95</u> at	1:23 o'clock P M., and duly recorded in Vol. M95
of <u>Power of Attor</u>	
FEE \$5.00/cc\$1.00	Bernetha G. Letsch, County Clerk By Capette The Lag

1