Form A205 100 O GENERAL POWER OF ATTORNEY

(With Durable Provision)

NOTICE: THIS IS AN IMPORTANT DOCUMENT, BEFORE SIGNING THIS DOCUMENT, YOU SHOULD KNOW THESE IMPORTANT FACTS. THE PURPOSE OF THIS POWER OF ATTORNEY IS TO GIVE THE PERSON WHOM YOU DESIGNATE (YOUR "AGENT") BROAD POWERS TO HANDLE YOUR PROPERTY, WHICH MAY INCLUDE POWERS TO PLEDGE, SELL OR OTHERWISE DISPOSE OF ANY REAL OR PERSONAL PROPERTY WITHOUT ADVANCE NOTICE TO YOU OR APPROVAL BY YOU. YOU MAY SPECIFY THAT THESE POWERS WILL EXIST EVEN AFTER YOU BECOME DISABLED, INCAPACITATED OR INCOMPETENT. THIS DOCUMENT DOES NOT AUTHORIZE ANYONE TO MAKE MEDICAL OR OTHER HEALTH CARE DECISIONS FOR YOU. IF THERE IS ANYTHING ABOUT THIS FORM THAT YOU DO NOT UNDERSTAND, YOU SHOULD ASK A LAWYER TO EXPLAIN IT TO YOU.

TOALL	PERSONS, be it known that	1 -11. WE	in proper	J e.
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the undersigned G	rantor, do hereby make and	grant a general power	of attorney to	
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My attorney-in-fact shall act in my name, place and stead in any way which I myself could do, if I were personally present, with respect to the following matters, to the extent that I am permitted by law to act through an agent:

(NOTICE: The grantor must write his or her initials in the corresponding blank space of a box below with respect to each of the subdivisions (A) through (N) below for which the grantor wants to give the agent authority. If the blank space within a box for any particular subdivision is NOT initialed, NO AUTHORITY WILL BE GRANTED for matters that are included in that subdivision.)

	(A) Real estate transactions
V[MET]	(B) Chattel and goods transactions
V[Ha]	(C) Bond, share and commodity transactions
V[142]	(D) Banking transactions
[]	(E) Business operating transactions
V[HH]	(F) Insurance transactions
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W/4-15]15	(I) Personal relationships and affairs of beginning
er[titedi])s	a. (J) Benefits:from military service: none value on
[1, 1, 1]	(K) Records, reports and statements
~[Att.]	(L) Full and unqualified authority to my attorney-in-fact to delegate any or all of
	the foregoing powers to any person or persons whom my attorney-in-fact shall
	select
V[HJ]	(M) All other matters
방송를 되는 경험을 받는데 함.	보다 교육하는 사람들은 여자 아이들라 보는 보다로 하셨습니다. 오랜드 내 사용부탁 취상 취상 취상 취상 취상 취상 모든 그 않는다. 그는 다 되는 그 나를 다 나를 다 먹었다.

Durable Provision:

(N) If the blank space in the block to the left is initialed by the grantor, this power of attorney shall not be affected by the subsequent disability or incompetence of the grantor.

Other Terms:

Ramona K. McLendodissa.

8529 Calais Circle

Sacramento, CA 95828



AQH

(Revised 1/95)

My attorney-in-fact hereby accepts this appointment subject to its terms and agrees to act and perform in said fiduciary capacity consistent with my best interests as he/she in his/her best discretion deems advisable, and I affirm and ratify all acts so undertaken.

TO INDUCE ANY THIRD PARTY TO ACT HEREUNDER, I HEREBY AGREE THAT ANY THIRD PARTY RECEIVING A DULY EXECUTED COPY OR FACSIMILE OF THIS INSTRUMENT MAY ACT HEREUNDER, AND THAT REVOCATION OR TERMINATION HEREOF SHALL BE INEFFECTIVE AS TO SUCH THIRD PARTY UNLESS AND UNTIL ACTUAL NOTICE OR KNOWLEDGE OF SUCH REVOCATION OR TERMINATION SHALL HAVE BEEN RECEIVED BY SUCH THIRD PARTY, AND I FOR MYSELF AND FOR MY HEIRS, EXECUTORS, LEGAL REPRESENTATIVES AND ASSIGNS, HEREBY AGREE TO INDEMNIFY AND HOLD HARMLESS ANY SUCH THIRD PARTY FROM AND AGAINST ANY AND ALL CLAIMS THAT MAY ARISE AGAINST SUCH THIRD PARTY BY REASON OF SUCH THIRD PARTY HAVING RELIED ON THE PROVISIONS OF THIS INSTRUMENT.

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Signed under seal this	I last award it & Privers of January
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O.E.-Z. Legal Furms. Before you use this form, read it, fill in all blacks, and make what you doubt the form's fitness for your purpose and use. E-Z Legal Forms and the reside.

Helen 8. Tocker
on this 16th day of January A.D., 1997
at 1:11 o'clock P. M. and duly recorded in Vol M97 of Power of Page 1406
Attorney G. Letsch, County Clerk

By Kullum Ross
Deputy.