33274

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DURABLE POWER OF ATTORNEY

KNOW ALL MEN AND WOMEN BY THESE PRESENTS, that I, JOHN N. PLOUFFE residing at 605 Eldorado Street, County of Klamath, State of Oregon, do hereby nominate, constitute, and appoint FAMA MARGARIET PLOUFFE residing at 605 Eldorado Street, County of Klamath, State of Oregon, my true and lawfal attorney in fact, for me and in my name, place, and stead, and for my use and benefit;

To ask, demand, sue for, recover, collect, and receive all such sums of money, debts, dues, accounts, legacies, bequests, interest, dividends, annuities, and demands whatsoever as are now or shall hereifter become due, owing, payable, or belonging to me and have, use and take all lawful ways and means in my name or otherwise for the recovery thereof, by attachments, arrests, distress, or otherwise, and to compromise and agree for the same and acquittances or other sufficient discharges for the same:

For me and in my name, to make, seal, and deliver; to bargain, contract, agree for, purchase, receive, and take lands, tenements, hereditaments, and accept the possession of all lands, and all deeds and other assurances, in the law therefor, and to leave, let, demise, bargain, sell remise, release, convey, mortgage, and hypothecate lands, tenements, and hereditaments upon such terms and conditions and under such covenants as she shall think fit;

Also to bargain and agree for, buy, sell, mortgage, hypothecate and in any and every way and manner deal in and with goods, wares, and merchandise, and other property in possession or in action, and to make, do, and transact all and every kind of business of And also formed.

And also for me and in my name, and as my act and deed, to sign, seal, execute, deliver, and acknowledge such deeds, leases, mortgages, hypothecations, bottonnies, chatter parties, bills of lading, bills, bunds, notes, receipts, evidence of debt, releases and satisfaction of mortgage, judgments and other debts, and such other instruments in writing of whatsoever kind and nature as may be necessary or

GIVING AND GRANTING unto my said attorney in fact fill power and authority to do and perform every act necessary, requisite, or proper to be done in and about the premises as fully as I might or could do if personally present, with full power of substitution and revocation, hereby ratifying and confirming all that my said attorney shall lawfully do or cause to be done by virtue hereof.

This power of attomey shall become effective upon the incapacity of the principal and upon receipt of a letter from my physician so stating.

My said attorneys and all persons unto whom these presents shall come may assume that this power of attorney has not been revolved until given actual notice either of such revocation or my death.

IN WITNESS WHEREOF, I have hereunto signed my name this _____ day of ________, 1997.

STATE OF OREGON, County of Klamath) ss.



DURABLE POWER OF ATTORNEY John N. Plcuffe TO

Fama Margariet Plouffe

<u>February 24</u>, 199<u>7</u>, by John N. Plouffe. <u>Amelle Livegu</u> Notary Public for Oregon MyCommissionExpires <u>9-22-2000</u>

> AITER RECORDING, RETURN TO: John N. Plouffe 605 Eldorado Street Klumath Falls, OR 97601

STATE OF OREGON, County of Klamath)ss.

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			1995年1月2日日							

witness my hand and seal of County affixed.

Fee \$5,00 Name