

**DURABLE POWER OF ATTORNEY**

**KNOW ALL MEN AND WOMEN BY THESE PRESENTS**, that I, SALLY ANN. MacLEOD residing at 6421 Sorrel Court, County of Klamath, State of Oregon, do hereby nominate, constitute, and appoint HAROLD W. MacLEOD residing at 6421 Sorrel Court, County of Klamath, State of Oregon, my true and lawful 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 hereafter 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 whatsoever nature and kind;

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, bottomries, charter parties, bills of lading, bills, bonds, 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 proper in the premises;

**GIVING AND GRANTING** unto my said attorney in fact full 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.

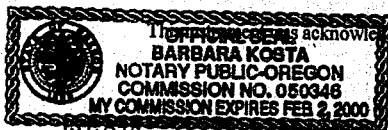
This power of attorney shall become effective upon the incapacity of the principal and upon receipt of a letter from my physician so stating.

My said attorneys and all persons unto whom these presents shall come may assume that this power of attorney has not been revoked until given actual notice either of such revocation or my death.

IN WITNESS WHEREOF, I have hereunto signed my name this 22 day of February, 1997.

Sally Ann MacLeod  
Sally Ann MacLeod

STATE OF OREGON, County of Klamath) ss.



The foregoing was acknowledged before me on February 22, 1997, by Sally Ann MacLeod.

Barbara Kosta  
Notary Public for Oregon  
My Commission Expires 2-2-2000

**DURABLE POWER OF ATTORNEY**

Sally Ann MacLeod  
TO

Harold W. MacLeod

**AFTER RECORDING, RETURN TO:**

Sally Ann MacLeod  
6421 Sorrel Court  
Klamath Falls, OR 97603

STATE OF OREGON, County of Klamath)ss.

I Certify that the within instrument was received for record on the 3rd day of March, 1997, at 3:53 o'clock P. M., and recorded in book/reel/volume No. M97, on page 6346, or as fee/file/instrument/microfilm/reception No. 33770, Record of Power of Attorney said County.

Witness my hand and seal of County affixed. Bernetha G. Letsch, Co. Clerk

Kathleen Ross  
Name Title

Fee: \$5.00