48998

Limited Power of Attorney

BE IT KNOWN, that I, John - Kelly Snedden, the undersigned Grantor(s),
do hereby grant a limited power of attorney to <u>Oon - Linder Sneedden</u> as my attorney-in-fact. (Appointe's Name)
My attorney-in-fact shall have full power and authority to undertake and perform the following on my behalf: (Describe limited authority in sufficient detail as to make the limited power easily identifiable)
anyoul medical and School Functions as needed for Donald L. Snedden
as needed for Wonald L. Snedden
My attorney-in-fact agrees to accept this appointment subject to its terms, and agrees to act and perform in said fiduciary capacity consistent with my best interests as he in his discretion deems advisable.
This power of attorney may be revoked by me at any time, provided any person relying on this power of attorney shall have full rights to accept the authority of my attorney-in-fact until in receipt of actual notice of revocation.
I hereby agree to accept the appointment as attorney-in-fact, pursuant to the foregoing Power of Attorney
Appointee's Signature
In Witness Whereof, I/We have hereunto set my hand/our hands this 19th day of Nor 1997
Bull medden
Signature of Grantor Signature of Grantor
(Print or type name here) (Print or type name here)
STATE OF NEVADA }
COUNTY OF Clare }
On this 19 day of November, 19 93 personally appeared before me, a Notary Public,
Kelly Diane Gnedden
personally known to me to be the person(s) whose name(s) is subscribed to the above instrument who acknowledged that 🗲 heexecuted the instrument.
Witness my hand and official seal NOTARY PUBLIC STATE OF NEVADA
County of Clark
SANDRA JAHAMILLO APPL No. 97-3348-1 NOTARY PUBLIC NOTARY PUBLIC NOTARY PUBLIC
STATE OF OREGON: COUNTY OF KLAMATH: ss.
Filed for record at request of Linda Snedden the 24th day of November A.D., 19 97 at 9:01 o'clock A. M., and duly recorded in Vol. M97 of Power of Attorney on Page 38395
Return: Linda Sneúden FEE \$5.00 Return: Linda Sneúden By Attlum Ross
4.25 KFO 97603