

Notice: The powers granted by this general power of attorney are extremely broad and sweeping. If you have any questions, obtain competent legal advice. This document does not authorize anyone to make medical or other health care decisions for you. You may revoke this power of attorney if you later wish to do so.

## GENERAL POWER OF ATTORNEY (Durable)

KNOW ALL MEN BY THESE PRESENTS, that I, JOANNE ADELLE HAMNER  
the undersigned Principal residing at 4217 STURDIVANT AVE., KLAMATH FALLS, ORE. 97603  
grant a general power of attorney to JACQUELINE IDA EKOTON  
residing at 14321 HOME AVE. PO. BOX 905 KENO, OREGON 97627  
said individual as my attorney-in-fact to act in my name, place and stead in any way which I myself could do if I were personally present, including but not limited to the following:

- a. To ask, demand, receive, sue for and recover all sums of money and any and all other property, tangible or intangible, due or hereafter to become due and owing, or belonging to me, and to make, give and execute, receipts, releases, satisfactions, or other discharges therefor.
  - b. To make, execute, endorse, accept, and deliver in my name or in the name of my attorney-in-fact all checks, notes, drafts and all other instruments, of whatsoever nature, as to my said attorney-in-fact may deem necessary to conserve my interests and/or exercise the rights and powers granted herein.
  - c. To execute, acknowledge and deliver any and all contracts, deeds, leases, and any other agreement or document affecting any and all property now owned by me or hereafter acquired.
  - d. To enter into and take possession of any real estate belonging to me, the possession of which I may be or may become entitled, and to receive in my name and to my use any rents and profits belonging to me, and to lease such real estate in such manner that my attorney-in-fact shall deem necessary and proper; and from time to time to renew leases.
  - e. To commence, prosecute, compromise, settle, adjust and/or discontinue any claims, suits, actions or legal proceedings for the recovery of sums of money or property now or hereafter due or to become due, or held by or belonging to me.
  - f. To prepare, or cause to be prepared all tax returns; to execute and file tax returns in my name and on my behalf; and to settle tax disputes.
  - g. To take any and all action necessary and proper to carry on, conduct and manage my business affairs, and to engage in and transact any lawful business in my name and on my behalf.
  - h. To defend, all actions and suits which shall be commenced against me, and to compromise, settle, and adjust all actions, accounts, dues, and demands in such manner as my said attorney-in-fact shall deem appropriate.
  - i. To do and perform every act and thing necessary or proper in the exercise of any of the rights and powers herein granted, as fully as I might or could do if personally present, with full power of substitution or revocation, hereby ratifying and confirming all that my attorney-in-fact, or his substitute or substitutes, shall lawfully do or cause to be done by virtue of the authority granted herein.
1. **Interpretation.** This instrument is to be construed and interpreted as a general power of attorney. The enumeration of specific items, acts, rights, or powers herein does not limit or restrict, and is not to be construed or interpreted as limiting or restricting the general powers herein granted to my attorney-in-fact.
2. **Durable Nature of Power of Attorney.** This power of attorney shall not be affected by my subsequent disability, incapacity or incompetence.
3. **Requirements For Revocation of Power of Attorney.** I may revoke this power of attorney by giving written notice to the attorney-in-fact. However, such revocation shall not be effective as to a third party who relies in good faith upon this power of attorney unless such third party has actual or constructive knowledge of the revocation or the revocation has been recorded in the public records where I reside.
4. **Acceptance of Attorney-In-Fact Appointment.** By signing this document, my attorney-in-fact accepts the appointment as my attorney-in-fact.
5. **Nomination of Guardian (Conservator).** If a guardian (conservator) is to be appointed for me,

I nominate JACQUELINE IDA EKOTON to serve as my guardian (conservator).

6. **Notice to Person Executing Durable Power of Attorney.** (The following statement is required under California law). A durable power of attorney is an important legal document. By signing the durable power of attorney, you are authorizing another person to act for you, the principal. Before you sign this durable power of attorney, you should know these important facts:

Your agent (attorney in fact) has no duty to act unless you and your agent agree otherwise in writing.

This document gives your agent the powers to manage, dispose of, sell and convey your real and personal property, and to use your property as security if your agent borrows money on your behalf.

Your agent will have the right to receive reasonable payment for services provided under this durable power of attorney unless you provide otherwise in this power of attorney.

The powers you give your agent will continue to exist for your entire lifetime, unless you state that the durable power of attorney will last for a shorter period of time or unless you otherwise terminate the durable power of attorney. The powers you give your agent in this durable power of attorney will continue to exist even if you can no longer make your own decisions respecting the management of your property.

You can amend or change this durable power of attorney only by executing a new durable power of attorney or by executing an amendment through the same formalities as an original. You have the right to revoke or terminate this durable power of attorney at any time, so long as you are competent.



This durable power of attorney must be signed and must be acknowledged before a notary public or signed by two witnesses. If it is signed by two witnesses, they must witness either (1) the signing of the power of attorney or (2) the principal's signing or acknowledgment of his or her signature. A durable power of attorney that may affect real property should be acknowledged before a notary public so that it may easily be recorded.

You should read this durable power of attorney carefully. When effective, this durable power of attorney will give your agent the right to deal with property that you now have or might acquire in the future. The durable power of attorney is important to you. If you do not understand the durable power of attorney, or any provision of it, then you should obtain the assistance of an attorney or other qualified person.

Jacqueline Ida Froton is to take care of all health medical, financial, 7. Special Instructions (money) needs, also to include all medical, health financial, Guardianship (Life Long) of my daughter Holly Charlotte Hamner, including Residing with Jacqueline Ida Froton if I should become not of sound mind or death.

WHEREFORE, the following parties sign this instrument on this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_\_.

Witness _____	Witness _____
Address _____	Address _____
Principal _____	Attorney-In-Fact _____

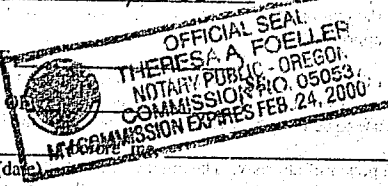
STATE OF OREGON )  
COUNTY OF KLAMATH )

On 1-8-98 before me, THERESA A. FOELLER  
(date) (name and title of officer taking acknowledgement)  
personally appeared JOANNE ADELLE HAMNER AND JACQUELINE IDA FROTON  
(name(s) of person(s) signing instrument)

personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

[Signature]  
Signature  
STATE OF OREGON  
COUNTY OF KLAMATH  
On \_\_\_\_\_  
(date)



Joanne Adelle Hamner  
JOANNE ADELLE HAMNER  
Jacqueline Ida Froton  
JACQUELINE IDA FROTON

\_\_\_\_\_ (name and title of officer taking acknowledgement)  
\_\_\_\_\_, personally appeared \_\_\_\_\_  
(name(s) of person(s) signing instrument)

personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Signature \_\_\_\_\_

Read the instructions and other important information on the package. When using this form you will be acting as your own attorney since Rediform, its advisors and retailers do not render legal advice or services. Rediform, its advisors and retailers assume no liability for loss or damage resulting from the use of this form.

STATE OF OREGON, ss.  
County of Klamath  
Filed for record at request of:  
on this 8th day of January A.D., 1998  
at 3:44 o'clock P. M. and duly recorded  
in Vol. M98 of Power of Attorney Page 588  
By Bernetha G. Letsch County Clerk  
Fee, \$10.00

Dated: \_\_\_\_\_

Jacqueline Ida Froton  
P.O. Box 905 Keno, Oregon  
97627