

POWER OF ATTORNEY/TEMPORARY CUSTODY AGREEMENT

I, DENISE GORSUCH, being of sound in mind and body, hereby give full Power of Attorney and Temporary Custody as it pertains to my child/children in matters affecting medical needs, schooling, public assistance, Medi-Cal, legal matters and all other issues pertaining to the well-being of my child/children to:

NAME DAVID NELSON
 ADDRESS 623 UPHAM
 CITY KLAMATH FALLS COUNTY KLAMATH
 STATE OREGON ZIP CODE 97601 PHONE (541) 850-9005

This agreement is granted for a period of -0- years, 05 months, and shall become effective on JUNE 19, 19 98, and shall terminate on NOVEMBER 19, 19 98.

The name(s) of said child/children will be/are as follows:

NAME	PLACE OF BIRTH	BIRTHDATE	SEX
KATINA MARIE PERRIN	SHASTA, CALIFORNIA	05-28-83	F
NAME	PLACE OF BIRTH	BIRTHDATE	SEX
NAME	PLACE OF BIRTH	BIRTHDATE	SEX
NAME	PLACE OF BIRTH	BIRTHDATE	SEX
NAME	PLACE OF BIRTH	BIRTHDATE	SEX
NAME	PLACE OF BIRTH	BIRTHDATE	SEX

Executed on this 19 day of JUNE, in this year 19 98, at Chowchilla, California.

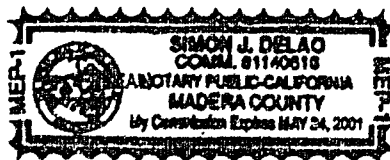
By: DENISE GORSUCH *Denise Gorsuch* CDC#: W - 73269

NOTARIZATION

STATE OF CALIFORNIA)
 COUNTY OF MADERA)

On this 19 day of JUNE in the year 19 98, before me, a Notary Public, State of California, duly commission and sworn, personally appeared DENISE GORSUCH, personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to this instrument and acknowledged that he/she executed it.

6/97



Notary Public: SIMON J. DELAO

State of California

My commission expires: MAY 24, 2001

STATE OF OREGON: COUNTY OF KLAMATH: ss.

Filed for record at request of _____ the 27th day of August, A.D., 19 98 at 9:19 o'clock A. M., and duly recorded in Vol. M98 of _____ Power of Attorney on Page 31448.

FEE \$5.00
 4.25c.c.

By Bernetha G. Letch, County Clerk
Kathleen Ross