FORM No. 15 – POWER OF ATTORNEY.

NS

65265

POWER OF ATTORNEY

Donna Murdock
P.O. Box 203
Chiloquin, OR 97624

To

Eileen Moore
2302 Garden
Klamath Falls, OR 9760

After recording, return to (Name, Address, Zip):

Donna Murdock
P.O. Box 203
Chiloquin, OR 97624

Fee: $5.00

SPACE RESERVED
FOR
RECORDER'S USE

'98 AUG 27 P 2:54 Vol. *M98* Page **31540**

STATE OF OREGON }
County of ..... Klamath, ... } ss.

I certify that the within instrument was received for record on the _27th_ day of ....August........, 19_98_., at _2:54_ o'clock _P.M._, and recorded in book/reel/volume No. _M98_ on page _31540_ and/or as fee/file/instrument/microfilm/reception No. _65265-Power_ of Attorney. Records of said County.

Witness my hand and seal of County affixed.

Bernetha G. Letsch, Co. Clerk
NAME   TITLE

By _Kathleen Ross_, Deputy.

KNOW ALL BY THESE PRESENTS that I, _Donna Murdock_ _Eileen Moore_ have made, constituted and appointed and by these presents do make, constitute and appoint

my true and lawful attorney, for me and in my name, place and stead and for my use and benefit, to make any medical or school related decisions for Dawn Elisabeth Murdock (Moore)

giving and granting unto my attorney the full power and authority to do and perform each and every act and thing whatsoever requisite and necessary to be done, as fully, to all intents and purposes, as I might or could do if personally present, hereby ratifying and confirming all that my attorney lawfully does or causes to be done by virtue hereof.
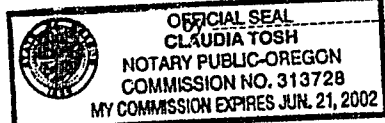
In construing this instrument, and where the context so requires, the singular includes the plural.

Dated August 26 , 19 98.

Donna J Murdock

STATE OF OREGON, County of _Klamath_) ss. 8-27 , 19 98,
This instrument was acknowledged before me on

OFFICIAL SEAL
CLAUDIA TOSH
NOTARY PUBLIC-OREGON
COMMISSION NO. 313728
MY COMMISSION EXPIRES JUN. 21, 2002

Claudia Tosh
Notary Public for Oregon
My commission expires 7-21-2002

5a