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STATE OF OREGON,



**POWER OF ATTORNEY**

Carl L. Biggs

To

Edward Roy Biggs

SPACE RESERVED  
FOR  
RECORDER'S USE

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

Mr. Edward Biggs

P.O. Box 307

Malin, OR 97632

State of Oregon, County of Klamath

Recorded 01/08/2002 11:02 a. m.

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Linda Smith, County Clerk

Fee \$ 26.00 # of Pgs 2

KNOW ALL BY THESE PRESENTS that I, Carl L. Biggs  
have made, constituted and appointed and by these presents do make, constitute and appoint Edward Roy Biggs  
my true and lawful attorney, for me and in my name, place and stead and for my use and benefit, to

Execute the sale of Real Property, known as Tract 1181, Block 2, Lot 3 M H X #170507

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 December 21, 2001

*Carl L. Biggs*

**ATTACHED**

STATE OF OREGON, County of \_\_\_\_\_) ss.

This instrument was acknowledged before me on \_\_\_\_\_, 19\_\_\_\_,  
by \_\_\_\_\_

Notary Public for Oregon

My commission expires \_\_\_\_\_

K26

**CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT**

State of California

County of Santa Clara

} ss.

On 12/21/01

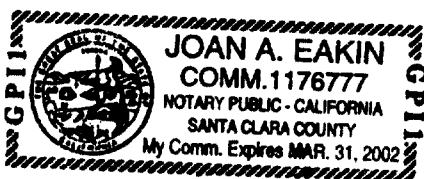
Date

before me, Joan A. Eakin, Notary Public

Name and Title of Officer (e.g., "Jane Doe, Notary Public")

personally appeared Carl L. Biggs

Name(s) of Signer(s)

☒ personally known to me☐ 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.

Joan A. Eakin  
Signature of Notary Public

Place Notary Seal Above

**OPTIONAL**

*Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.*

**Description of Attached Document**Title or Type of Document: Power of AttorneyDocument Date: 12/21/01Number of Pages: 1

Signer(s) Other Than Named Above: \_\_\_\_\_

**Capacity(ies) Claimed by Signer**Signer's Name: Carl L. Biggs☒ Individual☐ Corporate Officer — Title(s): \_\_\_\_\_☐ Partner — ☐ Limited ☐ General☐ Attorney in Fact☐ Trustee☐ Guardian or Conservator☐ Other: \_\_\_\_\_

Signer Is Representing: \_\_\_\_\_

RIGHT THUMBPRINT  
OF SIGNER  
Top of thumb here