

mtc-72216TM

# **RECORDING COVER SHEET**

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**M05-67846**

Klamath County, Oregon

10/31/2005 10:34:55 AM

Pages 2 Fee: \$26.00

## **After Recording Return To:**

JOHN L PETERS  
1220 LYNNEWOOD BLVD.  
KLAMATH FALLS, OR 97601

## **1. Name(s) of the Transaction(s):**

**LIMITED POWER OF ATTORNEY**

## **2. Direct Party (Grantor):**

**JOHN L. PETERS**

## **3. Indirect Party (Grantee):**

**SANDRA L. PETERS**

## **4. True and Actual Consideration Paid:**

**N/A**

## **5. Legal Description:**

**LOT 7 IN BLOCK 7 OF TRACT 1091 LYNNEWOOD, ACCORDING TO THE  
OFFICIAL PLAT THEREOF ON FILE IN THE OFFICE OF THE COUNTY  
CLERK OF KLAMATH COUNTY, OREGON**

**TAX ACCT NO.: 3808-025DD -05700-000 KEY NO.: 426337**

260.

# LIMITED POWER OF ATTORNEY

(With Durable Provision)

TO ALL PERSONS, be it known, that I, John L. Peters  
 of  
 as Grantor, do hereby make and grant a limited and specific power of attorney to Sandra L. Peters  
 of  
 and appoint and constitute said individual as my attorney-in-fact.

My named attorney-in-fact shall have full power and authority to undertake, commit and perform only the following acts on my behalf to the same extent as if I had done so personally; all with full power of substitution and revocation in the presence: (Describe specific authority)

1. To refinance the house at  
 1220 Lynnewood Blvd Klamath Falls Or.
2. To refinance the truck 1999 GMC.

The authority granted shall include such incidental acts as are reasonably required or necessary to carry out and perform the specific authorities and duties stated or contemplated herein.

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 my attorney-in-fact deems advisable, and I thereupon ratify all acts so carried out.

I agree to reimburse my attorney-in-fact all reasonable costs and expenses incurred in the fulfillment of the duties and responsibilities enumerated herein.

### Special durable provisions:

This power of attorney shall not be affected by disability of the Grantor. This power of attorney may be revoked by the Grantor giving notice of revocation to the attorney-in-fact, provided that any party relying in good faith upon this power of attorney shall be protected unless and until said party has either a) actual or constructive notice of revocation, or b) upon recording of said revocation in the public records where the Grantor resides.

### Other terms:

Signed under seal this 23 day of JULY, 2005  
 Signed in the presence of:

Witness

John L. Peters  
 Grantor

Witness

Sandra L. Peters  
 Attorney-in-Fact

State of CALIFORNIA }  
 County of STANISLAUS

On 7-23-05 before me, CLEMMIE L WALKER  
 appeared John L. Peters Sandra L. Peters whose names  
 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 Clemmie L Walker

Affiant Known Produced ID  
 Type of ID DRIVER LICENSE  
 (Seal)

