2006-018676Klamath County, Oregon



Return To: Clifford G. Owen

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Fee: \$26.00

P.O. Box 628 GENERAL POWER OF ATTORNEY Weed, C4. 96094

Notice: This is an important document. Before signing this document, you should know these important facts. By signing this document, you are not giving up any powers or rights to control your finances and property yourself. In addition to your own powers and rights, you may be giving another person, your attorney-in-fact, broad powers to handle your finances and property. This general power of attorney may give the person whom you designate (your "attorney-in-fact") broad powers to handle your finances and property, which may include powers to encumber, sell or otherwise dispose of any real or personal property without advance notice to you or approval by you. The powers will not exist after you become disabled, or incapacitated. This document does not authorize anyone to make medical or other health care decisions for you. If you own complex or special assets such as a business, or if there is anything about this form that you do not understand, you should ask a lawyer to explain this form to you before you sign it. If you wish to change your general power of attorney, you must complete a new document and revoke this one. You may revoke this document at any time by destroying it, by directing another person to destroy it in your presence or by signing a written and dated statement expressing your intent to revoke this document. If you revoke this document, you should notify your attorney-in-fact and any other person to whom you have given a copy of the form. You also should notify all parties having custody of your assets. These parties have no responsibility to you unless you actually notify them of the revocation. If your attorney-in-fact is your spouse and your marriage is annulled, or you are divorced after signing this document, this document is invalid. Since some 3rd parties or some transactions may not permit use of this document, it is advisable to check in advance, if possible, for any special requirements that may be imposed. You should sign this form only if the attorney-in-fact you name is reliable, trustworthy and competent to manage your affairs.

I. Cl. Flord G. Owen JR, of Klamath County, City of
Klamath Palls, State of Oregon, do hereby appoint: Cheford C. Co
of Siskingon County, City of Weed, State of California,
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, with respect to the
following matters to the extent that I am permitted by law to act through an agent:
(a) real estate transactions;
(b) chattel and goods transactions;
(c) bond, share and commodity transactions;
(d) banking transactions;
(e) business operating transactions;
(f) insurance transactions;
(g) estate transactions;
(h) claims and litigation;
(i) personal relationships and affairs;
(j) benefits from military service;
(k) records, reports and statements;
(l) retirement benefit transactions;
(m) making gifts to my spouse, children and more remote descendants, and parents;
(n) tax matters;
(o) all other matters;
(p) full and unqualified authority to my attorney-in-fact to delegate any or all of the foregoing powers to any person or persons whom my attorney-in-fact shall select;
(q) each of the above matters identified by the following letters:
(r) the following specific powers:

If the attorney-in-fact named above is	unable or unwilling to serve, I appoint	0	, of
•14-14-14-14-14-14-14-14-14-14-14-14-14-1	, City of	, State of	
to be my attorney-in-fact for all purpo	oses hereunder.		
attorney may rely upon such copy, an actual notice or knowledge of such re executors, legal representatives and as	a this power of attorney, I agree that any third d that revocation or termination of this powe vocation or termination shall have been rece ssigns, agree to indemnify and hold harmless such third party having relied on the provision	r of attorney shall be ineffective as to such ived by such third party. I, for myself and any such third party from any and all clai	third party until
This Power of Attorney may be revok	ed by me at any time.		
Dated: Suptemb	er 8,200 %		
Clifford L. Cli Signature of Grantor (Person appoint)			
oath, stated that he/she is the person de Halling Canel	County of Klarr County of Klarr Color the Grantor, Clifford 6 escribed in the above document and he/she s Midle State of Lugary	official SEAPATRICIA JANET NOTARY PUBLIC - 0	THEDE
My commission expires:/	1 10	COMMISSION NO. 4 MY COMMISSION EXPIRES	05500
I accept my appointment as Attorney-in-Signature of Attorney-in-Fact	n-Fact. Average A. A. A. Name of Atto	Tord & Owen	<u> </u>