

MTC13910-8585

**RECORDING COVER SHEET**

THIS COVER SHEET HAS BEEN PREPARED BY THE  
PERSON PRESENTING THE ATTACHED INSTRUMENT  
FOR RECORDING. ANY ERRORS IN THIS COVER SHEET  
DO NOT AFFECT THE TRANSACTION(S) CONTAINED  
IN THE INSTRUMENT ITSELF.

**2007-005021**

Klamath County, Oregon



00018062200700050210050058

03/21/2007 03:06:44 PM

Fee: \$41.00

**After Recording Return To:**

Clyde E. Cox  
1558 Lodgepole Avenue  
Anderson, CA 96007

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

General Power of Attorney

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

Teresa Cox

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

Clyde E. Cox

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

N/A

**5. Legal Description:**

N/A

41-

*Notice: The powers granted by this general power of attorney are extremely broad and sweeping. If you have any questions, obtain competent legal advice. This document does not authorize anyone to make medical or other health care decisions for you. You may revoke this power of attorney if you later wish to do so.*

## GENERAL POWER OF ATTORNEY (Durable)

KNOW ALL MEN BY THESE PRESENTS, that I, Teresa Jo. Cox,  
the undersigned Principal residing at 1558 Lodgepole Ave Anderson CA 96007,  
grant a general power of attorney to Clyde E. Cox  
residing at 1558 Lodgepole Ave Anderson CA 96007, and appoint  
said individual as 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,  
including but not limited to the following:

- a. To ask, demand, receive, sue for and recover all sums of money and any and all other property, tangible or intangible, due or hereafter to become due and owing, or belonging to me, and to make, give and execute, receipts, releases, satisfactions, or other discharges therefor.
- b. To make, execute, endorse, accept, and deliver in my name or in the name of my attorney-in-fact all checks, notes, drafts and all other instruments, of whatsoever nature, as to my said attorney-in-fact may deem necessary to conserve my interests and/or exercise the rights and powers granted herein.
- c. To execute, acknowledge and deliver any and all contracts, deeds, leases, and any other agreement or document affecting any and all property now owned by me or hereafter acquired.
- d. To enter into and take possession of any real estate belonging to me, the possession of which I may be or may become entitled, and to receive in my name and to my use any rents and profits belonging to me, and to lease such real estate in such manner that my attorney-in-fact shall deem necessary and proper; and from time to time to renew leases.
- e. To commence, prosecute, compromise, settle, adjust and/or discontinue any claims, suits, actions or legal proceedings for the recovery of sums of money or property now or hereafter due or to become due, or held by or belonging to me.
- f. To prepare, or cause to be prepared all tax returns; to execute and file tax returns in my name and on my behalf; and to settle tax disputes.
- g. To take any and all action necessary and proper to carry on, conduct and manage my business affairs, and to engage in and transact any lawful business in my name and on my behalf.
- h. To defend, all actions and suits which shall be commenced against me, and to compromise, settle, and adjust all actions, accounts, dues, and demands in such manner as my said attorney-in-fact shall deem appropriate.
- i. To do and perform every act and thing necessary or proper in the exercise of any of the rights and powers herein granted, as fully as I might or could do if personally present, with full power of substitution or revocation, hereby ratifying and confirming all that my attorney-in-fact, or his substitute or substitutes, shall lawfully do or cause to be done by virtue of the authority granted herein.

**1. Interpretation.** This instrument is to be construed and interpreted as a general power of attorney. The enumeration of specific items, acts, rights, or powers herein does not limit or restrict, and is not to be construed or interpreted as limiting or restricting the general powers herein granted to my attorney-in-fact.

**2. Durable Nature of Power of Attorney.** This power of attorney shall not be affected by my subsequent disability, incapacity or incompetence.

**3. Requirements For Revocation of Power of Attorney.** I may revoke this power of attorney by giving written notice to the attorney-in-fact. However, such revocation shall not be effective as to a third party who relies in good faith upon this power of attorney unless such third party has actual or constructive knowledge of the revocation or the revocation has been recorded in the public records where I reside.

**4. Acceptance of Attorney-In-Fact Appointment.** By signing this document, my attorney-in-fact accepts the appointment as my attorney-in-fact.

**5. Nomination of Guardian (Conservator).** If a guardian (conservator) is to be appointed for me,

I nominate Clyde E. Cox to serve as my guardian (conservator).

**6. Notice to Person Executing Durable Power of Attorney.** (The following statement is required under California law). A durable power of attorney is an important legal document. By signing the durable power of attorney, you are authorizing another person to act for you, the principal. Before you sign this durable power of attorney, you should know these important facts:

Your agent (attorney in fact) has no duty to act unless you and your agent agree otherwise in writing.

This document gives your agent the powers to manage, dispose of, sell and convey your real and personal property, and to use your property as security if your agent borrows money on your behalf.

Your agent will have the right to receive reasonable payment for services provided under this durable power of attorney unless you provide otherwise in this power of attorney.

The powers you give your agent will continue to exist for your entire lifetime, unless you state that the durable power of attorney will last for a shorter period of time or unless you otherwise terminate the durable power of attorney. The powers you give your agent in this durable power of attorney will continue to exist even if you can no longer make your own decisions respecting the management of your property.

You can amend or change this durable power of attorney only by executing a new durable power of attorney or by executing an amendment through the same formalities as an original. You have the right to revoke or terminate this durable power of attorney at any time, so long as you are competent.



You should read this durable power of attorney carefully. When effective, this durable power of attorney will give your agent the right to deal with property that you now have or might acquire in the future. The durable power of attorney is important to you. If you do not understand the durable power of attorney, or any provision of it, then you should obtain the assistance of an attorney or other qualified person.

### 7. Special Instructions.

WHEREFORE, the following parties sign this instrument on this 21st day of December, 2005

William Gary Comer  
Witness

**Witness**

20145 Bowtie Wy Redding  
Address

## Address

11

Principal

Vickie Cross  
Witness

Witness

19493 Spring Gulch Rd Anderson  
Address

Address

### Attorney-In-Fact

STATE OF California )  
COUNTY OF Shasta ) SS:

On 12/21/05 before me, Darla J. Dykier  
(date) (name and title)

(date)

(name and title of officer taking acknowledgement)

personally appeared KRESA JO CON

(name(s) of person(s) signing instrument)

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

**Signature**

STATE OF \_\_\_\_\_ )  
COUNTY OF \_\_\_\_\_ )  
SS. \_\_\_\_\_ )

On \_\_\_\_\_ before me, \_\_\_\_\_  
(date) (name and title of officer taking acknowledgement)

(date)

(name and title of officer taking acknowledgement)

\_\_\_\_\_, personally appeared

(name(s) of person(s) signing instrument)

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

**REDIFORM.** 10205

**GENERAL POWER  
OF ATTORNEY  
(Durable)**

# Principal!

## Attorney-In-Fact

***Dated:***

**RECORDING REQUESTED BY:**

**WHEN RECORDED MAIL TO:**

Clyde E. Cox  
1558 Lodgepole Ave.  
Anderson, CA 96007

LINE FOR RECORDER'S USE

SPACE ABOVE THIS

**UNIFORM STATUTORY FORM POWER OF ATTORNEY  
(California Probate Code Section 4401)**

**NOTICE: THE POWERS GRANTED BY THIS DOCUMENT ARE BROAD AND SWEEPING. THEY ARE EXPLAINED IN THE UNIFORM STATUTORY FORM POWER OF ATTORNEY ACT (CALIFORNIA PROBATE CODE SECTIONS 4400-4465). IF YOU HAVE ANY QUESTIONS ABOUT THESE POWERS, OBTAIN COMPETENT LEGAL ADVICE. THIS DOCUMENT DOES NOT AUTHORIZE ANYONE TO MAKE MEDICAL AND OTHER HEALTH-CARE DECISIONS FOR YOU. YOU MAY REVOKE THIS POWER OF ATTORNEY IF YOU LATER WISH TO DO SO.**

I,  
Teresa Cox, 1558 Lodgepole Avenue, Anderson, CA 96007, LOT 14 IN BLOCK 1 OF FIRST ADDITION TO ANDERSON HEIGHTS SUBDIVISION AS PER MAP THEREOF FILED FOR RECORD DECEMBER 10, 1958 IN BOOK 10 OF MAPS AT PAGE 12, SHASTA COUNTY RECORDS.

appoint

Clyde E. Cox, 1558 Lodgepole Avenue, Anderson, CA 96007, LOT 14 IN BLOCK 1 OF FIRST ADDITION TO ANDERSON HEIGHTS SUBDIVISION AS PER MAP THEREOF FILED FOR RECORD DECEMBER 10, 1958 IN BOOK 10 OF MAPS AT PAGE 12, SHASTA COUNTY RECORDS.

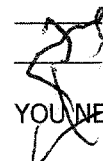
as my agent (attorney-in-fact) to act for me in any lawful way with respect to the following initialed subjects:

TO GRANT ALL OF THE FOLLOWING POWERS, INITIAL THE LINE IN FRONT OF (N) AND IGNORE THE LINES IN FRONT OF THE OTHER POWERS.

TO GRANT ONE OR MORE, BUT FEWER THAN ALL, OF THE FOLLOWING POWERS, INITIAL THE LINE IN FRONT OF EACH POWER YOU ARE GRANTING.

TO WITHHOLD A POWER, DO NOT INITIAL THE LINE IN FRONT OF IT. YOU MAY, BUT NEED NOT, CROSS OUT EACH POWER WITHHELD.

INITIAL

- \_\_\_\_\_ (A) Real property transactions.
- \_\_\_\_\_ (B) Tangible personal property transactions.
- \_\_\_\_\_ (C) Stock and bond transactions.
- \_\_\_\_\_ (D) Commodity and option transactions.
- \_\_\_\_\_ (E) Banking and other financial institution transactions.
- \_\_\_\_\_ (F) Business operating transactions.
- \_\_\_\_\_ (G) Insurance and annuity transactions.
- \_\_\_\_\_ (H) Estate, trust, and other beneficiary transactions.
- \_\_\_\_\_ (I) Claims and litigation.
- \_\_\_\_\_ (J) Personal and family maintenance.
- \_\_\_\_\_ (K) Benefits from social security, medicare, medicaid, or other governmental programs, or civil or military service.
- \_\_\_\_\_ (L) Retirement plan transactions.
- \_\_\_\_\_ (M) Tax matters.
-  (N) ALL OF THE POWERS LISTED ABOVE.

YOU NEED NOT INITIAL ANY OTHER LINES IF YOU INITIAL LINE (N).

SPECIAL INSTRUCTIONS: ON THE FOLLOWING LINES YOU MAY GIVE SPECIAL INSTRUCTIONS LIMITING OR EXTENDING THE POWERS GRANTED TO YOUR AGENT.

UNLESS YOU DIRECT OTHERWISE ABOVE, THIS POWER OF ATTORNEY IS EFFECTIVE IMMEDIATELY AND WILL CONTINUE UNTIL IT IS REVOKED.

This power of attorney will continue to be effective even though I become incapacitated.

**STRIKE THE PRECEDING SENTENCE IF YOU DO NOT WANT THIS POWER OF ATTORNEY TO CONTINUE IF YOU BECOME INCAPACITATED.**

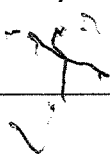
EXERCISE OF POWER OF ATTORNEY WHERE MORE THAN ONE AGENT DESIGNATED

If I have designated more than one agent, the agents are to act .

IF YOU APPOINTED MORE THAN ONE AGENT AND YOU WANT EACH AGENT TO BE ABLE TO ACT ALONE WITHOUT THE OTHER AGENT JOINING, WRITE THE WORD "SEPARATELY" IN THE BLANK SPACE ABOVE. IF YOU DO NOT INSERT ANY WORD IN THE BLANK SPACE, OR IF YOU INSERT THE WORD "JOINTLY", THEN ALL OF YOUR AGENTS MUST ACT OR SIGN TOGETHER.

I agree that any third party who receives a copy of this document may act under it. Revocation of the power of attorney is not effective as to a third party until the third party has actual knowledge of the revocation. I agree to indemnify the third party for any claims that arise against the third party because of reliance on this power of attorney.

Signed this      day of      , 20

  
\_\_\_\_\_  
(your signature)

54446-6432  
\_\_\_\_\_  
(your social security number)

BY ACCEPTING OR ACTING UNDER THE APPOINTMENT, THE AGENT ASSUMES THE FIDUCIARY AND OTHER LEGAL RESPONSIBILITIES OF AN AGENT.

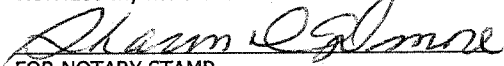
STATE OF CALIFORNIA }  
COUNTY OF SHASTA } ss

On April 22, 2006 before me, SHARON D GILMORE  
personally

appeared TERESA JO COX

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.

  
FOR NOTARY STAMP  
NOTARY SIGNATURE

SPACE BELOW RESERVED

