© 1988-2006 STEVENS-NESS LAW PUBLISHING CO., PORTLAND, OR NO PART OF ANY STEVENS-NESS FORM MAY BE REPRODUCED IN ANY FORM OR BY ANY ELECTRONIC OR MECHANICAL MEANS.

FORM No. 654 - GENERAL POWER OF ATTORNEY - DURABLE - (Short Form).

POWER OF ATTORNEY

-MARLTON 618 Westgate lamater Fe obert A. Stewar 2018 Westgate D DR ath Falls, OR. recording, return to (Name, Address, Zip):
ENCETH W. MARLTON
ZIOLS Westgate Dr.
(La math Dus, OR 9760

2007-008891 Klamath County, Oregon



05/15/2007 02:32:20 PM SPACE RES

Fee: \$21.00

FOR RECORDER'S USE No. ----, kecords of this County.

Witness my hand and seal of County affixed. TITLE

_____, Deputy. By _____

KNOW ALL BY THESE PRESENTS that I,

KEnneth W. marlton

have made, constituted and appointed, and by these presents do hereby make, constitute and appoint

Note of the work of the wo

GIVING AND GRANTING unto my attorney the full power and authority to do and perform all and every act and thing whatsoever requisite and necessary to be done in and about the premises, as fully to all intents and purposes as I might or could do if personally present, with full power of substitution and revocation, hereby ratifying and confirming all that my attorney shall lawfully do or cause to be done by virtue of these presents, and specifically acknowledging that any change in the status of my mental competency, or its deterioration, absence, or failure, whether temporary or permanent, shall not affect, diminish, or make null and void the effectiveness and validity of this instrument.

This power shall take effect (delete inapplicable phrase):

(a) on the date next written below;
(b) on the date I am adjudged incompetent by a court of proper jurisdiction.

If neither phrase is deleted, this power shall take effect on the date next written below.

My attorney and all persons unto whom these presents shall come may assume that this power of attorney has not been revoked until given actual notice either of such revocation or of my death.

In construing this instrument, and where the context so requires, the singular includes the plural.

In construing this instrument, and where the context so requires, the singular includes the plural

STATE OF OREGON, County of KAMA+1-

This instrument was acknowledged before me on _____

Leuc Notary Public for Oregon -My commission expires -

OFFICIAL SEAL
SUSIE COSTIC
NOTARY PUBLIC-OREGON
COMMISSION NO. 403610
MY COMMISSION EXPIRES MAR. 13, 2010

PUBLISHER'S NOTE: Use of this form in connection with real estate may subject the user to real estate licensing requirements. To avoic record this form in the county or counties where the real estate is located; 2) specify the address(es) of the property to be managed, co in dealing with the real property, may not receive any compensation that would require the agent to be licensed under ORS 696 or other