Yvonne L. Muller Tagio Kinney Loop Fragency OR 97408

Returned to

2008-006770 Klamath County, Oregon

00045753200800067700030032

05/07/2008 01:10:28 PM

Fee: \$31.00

Unlimited Power of Attorney

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 unlimited power of attorney may give the person whom you designate (your "attorney-in-fact") broad powers to handle your finances and property, which includes 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 unlimited 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 that you appoint is reliable, trustworthy and competent to manage your affairs. This form must be signed by the Principal (the person appointing the attorney-in-fact), witnessed by two persons other than the notary public, and acknowledged by a notary public.

I. Yvonne L. Muller	, of		
City of Grazine	, State of	OREGON	, as Principal,
do appoint Leo J. Muller	, of		,
City of Engine	, State of	OREGON	, as my
attorney-in-fact to act in my name, place and ste			
with respect to all the following matters to the e	extent that I am	permitted by law to act throu	gh an agent:

I grant my attorney-in-fact the maximum power under law to perform any act on my behalf that I could do personally, including but not limited to, all acts relating to any and all of my financial transactions and/or business affairs includ-

Any & all documents

ing all banking and financial institution transactions, all real estate or personal property transactions, all insurance or annuity transactions, all claims and litigation, and any and all business transactions.

If the attorney-in-fact named above is unable or unwilling to serve, then I appoint, of		
	, State of, to be my	
attorney-in-fact for all purposes hereunder.		
ally present. My attorney-in-fact accepts this appointment advisable. To induce any third party to rely upon this power of attorney may rely upon of attorney shall be ineffective as to such third party untition shall have been received by such third party. I, for reassigns, agree to indemnify and hold harmless any such third party by reason of such third party having relied on ney shall not be effective in the event of my future disable me at any time and is automatically revoked upon my de-	to act on my behalf in the same manner as if I were personnt and agrees to act in my best interest as he or she considers wer of attorney, I agree that any third party receiving a signed on such copy, and that revocation or termination of this power il actual notice or knowledge of such revocation or terminamyself and for my heirs, executors, legal representatives and third party from any and all claims that may arise against such the provisions of this power of attorney. This power of attorney ility or incapacity. This power of attorney may be revoked by eath. My attorney-in-fact shall not be compensated for his or e, my estate, heirs, successors, or assigns for acting or refrainmisconduct or gross negligence.	
Signature and Declaration of Principal		
addition of the responding the and the modern do my pr	, the principal, sign my name to this power of attorney and, being first duly sworn, do declare to the undersigned ower of attorney and that I sign it willingly, or willingly direct oluntary act for the purposes expressed in the power of attord mind and under no constraint or undue influence.	
Signature of Principal		
Witness Attestation		
I the fi	rst witness, and I,,	
the second witness, sign my name to the foregoing powe undersigned authority that the principal signs and execut signs it willingly, or willingly directs another to sign for	er of attorney being first duly sworn and do declare to the tes this instrument as his/her power of attorney and that he/she him/her, and that I, in the presence and hearing of the principal's signing and that to the best of my knowledge the principal	
Signature of First Witness	Signature of Second Witness	

.

and a ♥	
Notary Acknowledgment	W10. 11
State of Orlgon County of	
Subcribed, sworn to and acknowledged before me by	Wonne L. Muler, the Principal, and
subscribed and sworn to before me by	, witness, this day of
May 2008	
	OFFICIAL SEAL JILL M. RAWLINS
Jung. Rawles	NOTARY PUBLIC-OREGON COMMISSION NO. 420688 COMMISSION NO. 12011
Notary Signature	MY COMMISSION EXPIRES OCT. 10, 2011
Notary Public,	
In and for the County of Klamath Stat	e of <u>Uregor</u>
Notary Public, In and for the County of //anath Stat My commission expires: ////////////////////////////////////	Seal
Acknowledgment and Acceptance of Appointment as	Attorney-in-Fact
Newtonied Britain and a second	
I,	have read the attached power of attorney and am the
person identified as the attorney-in-fact for the principal	. I hereby acknowledge that I accept my appointment as At-
torney-in-Fact and that when I act as agent I shall exerci	se the powers for the benefit of the principal; I shall keep the tercise reasonable caution and prudence; and I shall keep a
full and accurate record of all actions, receipts and disbu	resements on behalf of the principal.
$Q_2 = \sqrt{2}$	
The mes	
Signature of Attorney-in-Fact	Date
Acknowledgment and Acceptance of Appointment as	Successor Attorney-in-Fact
I,	have read the attached power of attorney and am the principal. I hereby acknowledge that I accept my appoint-
ment as Successor Attorney-in-Fact and that, in the abse	nce of a specific provision to the contrary in the power of
attorney, when I act as agent I shall exercise the powers	for the benefit of the principal; I shall keep the assets of the
principal separate from my assets; I shall exercise reason	nable caution and prudence; and I shall keep a full and accu-
rate record of all actions, receipts and disbursements on	behalf of the principal.
Signature of Successor Attorney-in-Fact	Date