

2013-002356

Klamath County, Oregon



00132238201300023560030038

03/04/2013 03:21:22 PM

Fee: \$47.00

RECORDING COVER SHEET

ORS 205.234

This cover sheet has been prepared by the person presenting the attached instrument for recording. Any error in this cover sheet DOES NOT affect the transaction(s) contained in the instrument itself.

1. AFTER RECORDING RETURN TO -

Required by ORS 205.180(4) &
205.238:

**Andrew C. Brandsness
411 Pine Street
Klamath Falls, OR 97601**

2. TITLE(S) OF THE TRANSACTION(S) - Required by ORS 205.234(1)(a)

Note: "Transaction" means any action required or permitted by law to be recorded, including, but not limited to, any transfer, encumbrance or release affecting title to or an interest in real property. Enter descriptive title for the instrument:

Power of Attorney

3. DIRECT PARTY / GRANTOR and Address - Required by ORS 234(1)(b)

Arline L. Greenhaw

Grantor's Address:

**615 Washburn Way
Klamath Falls, OR 97603**

4. INDIRECT PARTY / GRANTEE and Address - Required by ORS 234(1)(b)

Marcine K. Tune

Grantee's Address:

**42835 Connecticut Street
Palm Desert, CA 92211**

- 5. For an instrument conveying or contracting to convey fee title, the information required by ORS 93.260:**

**UNTIL A CHANGE IS REQUESTED,
ALL TAX STATEMENTS SHALL BE
SENT TO THE FOLLOWING
ADDRESS:**

n/a

6. TRUE AND ACTUAL

CONSIDERATION - Required by
ORS 93.030 for an instrument
conveying or contracting to convey
fee title or any memorandum of
such instrument:

\$n/a

**7. TAX ACCOUNT NUMBER OF THE PROPERTY, IF THE INSTRUMENT CREATES A
LIEN OR OTHER INTEREST THAT COULD BE SUBJECT TO TAX FORECLOSURE -**

Required by ORS 312.125(4)(b)(B):

n/a

Returned to Counter

POWER OF ATTORNEY

ARLINE L. GREENHAW, the "principal," of 19307 GREEN ACRES WEST, REDDING, CA 96002, herewith appoints Marcine K. Tune of 42835 Connecticut, Palm Desert, CA 92211, as her attorney in fact, with the same authority as Principal would have to do the following acts:

To conduct any and all business regarding my deposit accounts, loans, safe deposit box, or other banking business at any bank, credit union or other financial institution. This power shall specifically include, but is not limited to the right to deposit, withdraw, sign checks or drafts, make stop payment orders, and to conduct any banking transactions necessary or possible in regard to my banking relationship with any and all banks.

To manage any and all real estate which I own, lease or have an interest in and to execute a deeds, leases, contracts for sale and purchase or other instruments in regard to any real estate interests which I hold regardless of where located.

To examine and to order copies of any and all of my educational records, including both financial and student loan and health related records, at any colleges, schools or other educational institutions.

To manage, sell, lease, repair, borrow on the credit of, or otherwise deal with all of my personal and intangible personal property.

To act for me in the regard to the following:

This power of attorney shall not become effective until I am determined to be unable to manage my own financial affairs. Such determination shall be made in writing by my primary treating physician at the time, or a board certified neurologist or psychiatrist. Any third party may rely upon the representation of my attorney in fact that this determination has been made.

This power of attorney is intended to be a durable power of attorney and the power shall not be revoked or lapse due to my incapacity or disability.

NOTICE

THIS GENERAL POWER OF ATTORNEY IS A BINDING AND IMPORTANT LEGAL INSTRUMENT AND GIVES BROAD AUTHORITY TO YOUR ATTORNEY IN FACT TO MANAGE, SELL OR DISPOSE OF ALL OF YOUR PROPERTY.

THIS POWER WILL GO INTO EFFECT UPON YOUR DISABILITY ONCE CERTIFIED BY YOUR PRIMARY TREATING PHYSICIAN OR A BOARD CERTIFIED EUROLOGIST OR PSYCHIATRIST AND WILL REMAIN IN EFFECT UNTIL YOU REGAIN CAPACITY.

Arline L. Greenhaw
ARLINE L. GREENHAW, As Principal

Dated: May 8, 2000

Certificate Of Notary Public

County of, SHASTA, State of, CALIFORNIA
On, May 8, 2000, before me, Karen A. Lee, Notary Public
personally appeared Arline L. Greenhaw, personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument and acknowledged he she executed the same in his her authorized capacity, and that by his her signature on the instrument the person or the entity upon behalf of which the person acted, executed the instrument.

WITNESS my hand and official seal.

Signature, Karen A. Lee (Seal)

