

1st 2463508-MJ

RECORDING COVER SHEET

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2015-007664

Klamath County, Oregon

07/14/2015 12:12:46 PM

Fee: \$47.00

After Recording Return To:

**Steve Chiaramonte
PO Box 490
Fiddletown, CA 95629**

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

Uniform Statutory Form Power of Attorney

2. Direct Party (Grantor):

Mary Chiaramonte

3. Indirect Party (Grantee):

Steve Chiaramonte and Sheila Ryckewaert

4. Consideration Amount:

N/A

f.
52.00

Uniform Statutory Form Power of Attorney
(California Probate Code Section 4401)

I, Mary Chiaramonte who resides at 112 N. Cypress Ave. Santa Clara, CA 95050 appoint my son, Steve Chiaramonte who resides at 15040 Tyler Road Fiddletown, CA 95629 and my daughter Sheila Ryckewaert who resides at 318 Los Padres Blvd Santa Clara CA 95050 as my agents (attorney-in-fact) to act for me in any lawful way with respect to all of the following subjects:

Real property transactions, tangible personal property transactions, stock and bond transactions, banking and other financial institution transactions, insurance and annuity transactions, benefits from social security, medicare & medicaid and tax matters.

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

**EXERCISE OF POWER OF ATTORNEY WHERE
MORE THAN ONE AGENT DESIGNATED**

As I have designated more than one agent, the agents are expected to act jointly.

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 31 day of March, 2014 in Santa Clara, California

Mary Chiaramonte

CERTIFICATE OF ACKNOWLEDGMENT OF NOTARY PUBLIC

State of California

County of Santa Clara

On March 31, 2014 before me, Edward Russell (Notary Public), personally appeared Mary Chiaramonte, who 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.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature *Edward Russell* (Seal)

