

After Recording Return To:
Thomas C. Nicholson, P.C.
552 Laurel Street, PO Box 308
Florence, OR 97439

2016-005922
Klamath County, Oregon



06/07/2016 09:23:07 AM

Fee: \$62.00

DURABLE POWER OF ATTORNEY

I, **CARLA LOUISE ADAMES**, as Principal, residing at 2131 9TH Street, Florence, Lane County, Oregon 97439, have this day appointed **LONNIE FREDRICK McCAIN**, residing at 5328 Wales Drive, Eugene, Oregon 97402 as my Agent and Attorney in Fact ("my Agent"), with power and authority to exercise the powers set forth below, or in the event Lonnie Fredrick McCain shall be deceased, financially incapable and/or incapacitated as those terms are defined under ORS 125.005 (3) and (5), or decline to serve in writing, then **LINDA SUSAN STURM**, residing at 835 7th Street, Florence, Oregon 97439 shall serve as my agent with power and authority to exercise the powers set forth below:

1. Support. To make expenditures for my care, health, education, support, maintenance and general welfare.
2. Managing, Acquiring and Disposing of Assets. Take possession of, retain, change the form of, manage, maintain, improve, lease, grant options on, encumber, sell, convey, exchange, purchase or otherwise acquire or dispose of any of my real or personal property or any interest in any property, in any manner and on any terms my Agent considers to be in my best interests.
3. Checks and Notes. Receive, endorse, sign, sell, discount, deliver and deposit checks, drafts, notes and negotiable or nonnegotiable instruments, including any drawn on the Treasury of the United States or the State of Oregon or any other state or governmental entity.
4. Financial Institutions. Enter into any transaction with and contract for any services rendered by a financial institution, including continuing, modifying, or terminating existing accounts; opening new accounts; drawing, endorsing or depositing checks, drafts and other negotiable instruments; acquiring and transferring certificates of deposit; withdrawing funds deposited in my name alone or in my name and the name of any other person or persons; and providing or receiving financial statements. "Financial Institutions" means banks, trust companies, savings banks, commercial banks, savings and loan associations, credit unions, loan companies, thrift institutions, mutual fund companies, investment advisors, brokerage firms and other similar institutions.
5. Investments and Secured Transactions. Invest and reinvest in common or preferred stocks, bonds, mutual funds, common trust funds, money market accounts, secured and unsecured obligations, mortgages and other real or personal property; engage in investment transactions with any financial institution; and hold my securities in the name of my Agent's nominee or in unregistered form.

6. Insurance and Annuity Contracts. Purchase, maintain, modify, renew, convert, exchange, borrow against, surrender, cancel and collect or select payment options under any insurance or annuity contract. This power shall extend to any insurance I own on the life of my Agent. Any receipt, release or other instrument executed by my Agent in connection with any insurance or annuity contract shall be binding and conclusive upon all persons.

7. Business Interests. Continue, participate in, sell, reorganize or liquidate any business or other enterprise owned by me, either alone or with any other person or persons.

8. Voting. Appear and vote for me in person or by proxy at any corporate or other meeting.

9. Flower Bonds. Purchase U.S. Treasury Bonds redeemable at par in payment of Federal Estate Tax, and borrow funds and pledge the bonds as collateral to make the purchase.

10. Retirement Plans. Establish, modify, contribute to, select payment options under, make elections under, receive payments from, make rollovers to and take any other steps I might take with respect to IRA accounts and other retirement plans.

11. Credit Cards. Cancel or continue my credit cards and charge accounts, use my credit cards to make purchases and sign charge slips on my behalf.

12. Collections. Demand and collect any money or property owed to me and give a receipt or discharge for the money or property collected.

13. Debts. Pay my debts and other obligations.

14. Litigation. Sue upon, defend, compromise or submit to arbitration or adjust any controversies in which I may be interested; and act in my name in connection with any complaint, proceeding or suit.

15. Borrowing. Borrow in any manner and on any terms my Agent considers to be in my best interests, including borrowing from my Agent's own funds, and give security for repayment.

16. Lending. Lend funds to any person, including my Agent, provided that the loan is adequately secured and bears a reasonable rate of interest.

17. Taxes and Assessments. Pay any tax or assessment; appear for and represent me, in person or by attorney, in all tax matters; execute any power of attorney forms required by the Internal Revenue Service or any other taxing authority; receive confidential information from any taxing authority; prepare, sign and file federal, state and local tax returns and reports for all tax matters, including income, gift, estate, inheritance, generation-skipping, sales, business, FICA, payroll and property tax matters; execute waivers, including waivers of restrictions on assessment or collection of tax deficiencies and waivers of notice of disallowance of a claim for credit or refund; execute consents, closing agreements and other documents related to my tax liability;

make any elections available under federal or state tax law; and delegate authority or substitute another representative with respect to all matters described in this paragraph.

18. Government Benefits. Perform any act necessary or desirable in order for me to qualify for and receive all types of government benefits, including Medicare, Medicaid, Social Security, veterans' and workers' compensation benefits. The power granted under this paragraph shall include the power to dispose of any property or interest in property by any means (including making gifts or establishing and funding trusts) and the power to name or change beneficiaries under insurance policies, pay-on-death arrangements, retirement plans and accounts, and any other assets, provided that any disposition or designation shall be consistent with my existing estate plan to the extent reasonably possible.

19. Disclaimer. Disclaim any property, interest in property or power to which I may be entitled; and take all steps required to make the disclaimer effective under state and federal laws, including Section 2518 of the Internal Revenue Code or any successor statute. In deciding whether to disclaim, my Agent shall consider the effect of disclaimer on taxes that may be payable, on qualification for government benefits and on my existing estate plan.

20. Elective Share Rights. Exercise any right to claim an elective share in any estate or under any Will.

21. Fiduciary Positions. Resign from or renounce on my behalf fiduciary positions, including personal representative, trustee, conservator, guardian, attorney-in-fact and officer or director of a corporation; and discharge me from further responsibility by filing accountings with a court or settling by formal or informal methods.

22. Safe Deposit Box. Have access to and make deposits to or withdrawals from any safe deposit box rented in my name alone or in my name and the name of any other person or persons.

23. Mail. Redirect my mail.

24. Custody of Documents. Take custody of important documents, including any Will, trust agreements, deeds, life insurance policies and contracts.

25. Employees and Advisors. Employ, compensate and discharge attorneys, accountants, investment advisors, property managers, custodians, physicians, dentists, nurses, household help and others to render services to me or for my benefit.

26. Gifts. Make gifts on my behalf, whether outright, in trust or in custodianship, to or for the benefit of my lineal descendants and the spouses of my lineal descendants and any charitable organizations to which I have contributed.

(a) Gifts made under this paragraph may be in any amount.

(b) Gifts made under this paragraph shall be consistent with my existing estate plan to the extent reasonably possible and with the reduction or elimination of estate and inheritance taxes payable by reason of my death, or to establish my eligibility for Medicaid benefits. I specifically consent to the receipt of Medicaid benefits.

27. Trusts. Establish a revocable or irrevocable trust, amend or terminate an existing trust, and transfer any of my real or personal property to a trust, provided that the trust is consistent with my existing estate plan to the extent reasonably possible.

28. Beneficiary Designations. Designate or change beneficiaries under insurance policies, pay-on-death arrangements, retirement plans and accounts, and any other assets, provided that any beneficiary designation shall be consistent with my existing estate plan to the extent reasonably possible. This power includes the power to designate my Agent as beneficiary.

29. Nomination of Guardian and Conservator. To the extent permitted by state law, I nominate my Agent to act as my guardian and conservator if I become incapacitated.

30. Perform Other Acts to Carry Out the Powers Granted. Execute and deliver any written instrument and perform any other act necessary or desirable to carry out any of the powers granted to my Agent under this power of attorney, as fully as I might do personally. I ratify and confirm all acts performed by my Agent pursuant to this power of attorney.

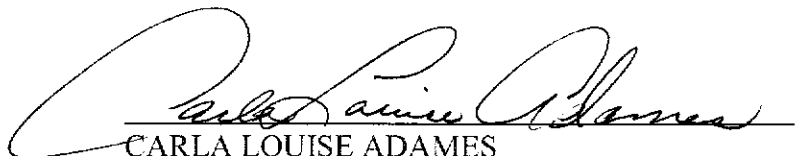
31. Third Party Reliance. Third parties who rely in good faith on the authority of my Agent under this power of attorney shall not be liable to me, to my estate or to my heirs, successors or assigns. Third parties without actual notice of revocation may conclusively rely on the continued validity of this power of attorney. If requested, my Agent shall furnish, and a third party may conclusively rely on, an affidavit or certificate stating that (1) I was competent at the time this power of attorney was executed, (2) the power of attorney has not been revoked, (3) my Agent continues to serve as attorney-in-fact under the power of attorney, and (4) my Agent is acting within the scope of authority granted under the power of attorney. My Agent may sue or pursue other action against any third party who refuses to honor this power of attorney after such an affidavit or certificate has been provided.

32. Health Care Information/Health Care Decisions. To request and receive any and all medical information and/or medical records including any and all confidential information relating to my physical and/or mental health, and to make any and all decisions/arrangements regarding my physical and/or mental health and all care therefore, including but not limited to all mental, medical, dental, surgical and vision issues as the need may arise.

33. Durability. The powers granted to my Agent under this power of attorney shall continue to be exercisable even though I have become disabled or incompetent.

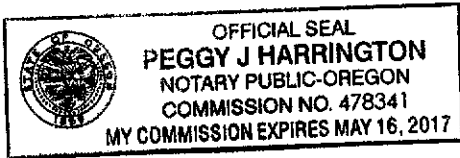
34. Governing Law. The validity and construction of this power of attorney shall be determined under Oregon law.

I have signed this power of attorney this 24 day of May, 2016.


CARLA LOUISE ADAMES

STATE OF OREGON)
) ss.
County of Lane)

On this 24th day of May, 2016, before me personally appeared Carla Louise Adames and acknowledged to me that she executed this power of attorney freely and voluntarily.



Peggy J. Harrington
Notary Public, State of Oregon
My Commission expires: 5/16/2017