RECORDING COVER SHEET

ORS 205.234

This cover sheet has been prepared by:

2020-000388

Klamath County, Oregon

01/10/2020 01:46:01 PM

Fee: \$92.00



	ction(s) contair	cover sheet DOES NOT affect the instrument itself. 68AM	ne			
Pleas	AFTER RE	pe information. CORDING RETURN TO – DRS 205.180(4) & 205.238:		+ 6	3)	
	Name: Benjamin H. Lebkowsky		· .			
	Address:	11610 Ramirez Rd.		\nearrow		
	City, ST Zip:	Klamath Falls, OR 97603		[A]		
2.	Note: "Transa	or release affecting title to or an interest in title(s): Pequaction required or per or release affecting title to or an interest in title(s): Power of Attorn	mitted by law to l in real property. E	pe recorded, including		
3)	DIRECT PA for Conveyand Grantor Nam	ARTY / GRANTOR Names and Acces list Seller; for Mortgages/Liens list Boe: Benjamin H. Le	rrower/Debtor	quired by ORS 205.23	34(1)(b)	
Ç.		PARTY / GRANTEE Names and ces list Buyer; for Mortgages/Liens list Be	neficiary/Lender/C		234(1)(b)	
	Grantee Nam					
5.	the information UNTIL A C	nent conveying or contracting to convey for n required by ORS 93.260: HANGE IS REQUESTED, ALL EMENTS SHALL BE SENT TO OWING ADDRESS:	ee title, 6	Required by ORS 93	TUAL CONSIDERATION — 3.030 for an instrument conveying vey fee title or any memorandum	
	Name:	No Change				
	Address:	9				
		· · · · · · · · · · · · · · · · · · ·				
72	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)					
	Tax Acct. No.:	Tax Acct. No.: N/A				

SPECIAL POWER OF ATTORNEY

This is a Military Power of Attorney prepared pursuant to section 1044b of Title 10, United States Code, and executed by a person authorized to receive legal assistance from the Military Service. Federal law exempts this power of attorney from any requirement of form, substance, formality, or recording that is prescribed for powers of attorney by the laws of a State, the District of Columbia, or a commonwealth, territory, or possession of the United States. Federal law specifies that this power of attorney shall be given the same legal effect as a power of attorney prepared and executed in accordance with the laws of the jurisdiction where it is presented.

KNOW ALL PERSONS BY THESE PRESENTS, which are intended to constitute a Special Durable Power of Attorney, that I, BENJAMIN H. LEBKOWSKY, a legal resident of Oregon and presently residing at 11610 Ramirez Rd, Klamath Falls, OR 97603, hereby make, constitute and appoint SALITA L. LEBKOWSKY, residing at 11610 Ramirez Rd, Klamath Falls, OR 97603, as my Attorney-in-Fact, to act in my name, place and stead in any way which I could do if I were personally present, with the respect to the following:

Sell and convey in fee, for me and in my name, my real property, located at 5168 LAURELWOOD DRIVE, KEAMATH FALLS, OR 97603, in the County of KLAMATH, State of OREGON, and legally described as: SINGLE FAMILY HOME, for such price or prices and on such terms as my said Attorney-In-Fact shall decide, (but for not less than \$215000 (Two Hundred Fifteen Thousand Dollars and Zero Cents)). My Attorney-in-Fact is hereby empowered to sign my name and execute on my behalf all deeds, instruments and other documents necessary or proper to complete the transaction.

TERMINATION: This Special Durable Power of Attorney shall terminate on 4th day of January, 2021, unless I revoke it sooner in writing.

This Special Durable Power of Attorney shall not be revoked or terminated by my disability, nor shall the agency created by this Special Durable Power of Attorney be revoked or terminated by my death or disability as to my Attorney-in-Fact or such other person, who without actual knowledge or actual notice of my death has acted or acts in good faith, under, or in reliance upon, this Special Durable Power of Attorney, and any action so taken, unless otherwise invalid or unenforceable, shall be binding upon me, my heirs, devisees, and personal representatives.

If prior to the termination date, a written statement by a licensed physician, signed and acknowledged before a Notary Public prior to the termination date, is attached to this document stating that I am mentally or physically incapacitated, this Special Durable Power of Attorney shall remain in full force and effect until I am no longer deemed incapacitated.

If on the above termination date I am carried in a military status of "missing", "missing-in-action", or "prisoner of war", this Special Durable Power of Attorney shall remain valid and in full force and effect until sixty (60) days after I have been returned to United States Military control and termination of such status.

To induce a third party to act under this Special Durable Power of Attorney, I agree that any third party may rely upon this document, and that revocation or termination shall be ineffective as to such third party unless and until actual notice or knowledge of such revocation or termination has been received by such third party. I also agree for myself, my heirs, executors, legal representatives and assigns, to indemnify and hold harmless any such third party from and against any and all claims that may arise against such third party by reason of such third party having relied upon the provisions of this Special Durable Power of Attorney.

IN WITNESS THEREOF, I have executed this Special Durable Power of Attorney on 4th day of January, 2020.

BENJAMIN H. LEBKOWSKY

WITH THE ARMED FORCES AT AL DHAFRA AIR BASE, UNITED ARAB EMIRATES

On 4th day of January, 2020, I, TSgt Jamie L. Barker, a Military Paralegal and Notary Public under the provisions of Title 10, United States Code, Section 1044a, certify that the person who signed this instrument is entitled to legal assistance within the meaning of Title 10, United States Code, Section 1044, and did personally appear before me and sign this instrument and acknowledge doing so freely and voluntarily.

Name of Paralegal: Jamie L. Barker Grade and Branch of Service: TSgt, USAF

Command or Organization: Al Dhafra, UAE (380 AEW/JA)