

**RECORDING COVER SHEET**

ORS 205.234

This cover sheet has been prepared by:

**2021-018676**

Klamath County, Oregon

12/17/2021 09:22:01 AM

Fee: \$92.00

Any error in this cover sheet DOES NOT affect the transaction(s) contained in the instrument itself.

Reference: 506703AM

Please print or type information.

**1. AFTER RECORDING RETURN TO –**

Required by ORS 205.180(4) &amp; 205.238:

Name: Jamie Michelle West  
1721 Majestic 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:

**Document Title(s):** Special Power of Attorney**3. DIRECT PARTY / GRANTOR Names and Addresses –** Required by ORS 205.234(1)(b)  
for Conveyances list Seller; for Mortgages/Liens list Borrower/Debtor**Grantor Name:** Alexander D. West**Grantor Name:** \_\_\_\_\_**4. INDIRECT PARTY / GRANTEE Names and Addresses –** Required by ORS 205.234(1)(b)  
for Conveyances list Buyer; for Mortgages/Liens list Beneficiary/Lender/Creditor**Grantee Name:** Jamie Michelle West**Grantee Name:** \_\_\_\_\_**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:**

Name: NO CHANGE  
Address: \_\_\_\_\_  
City, ST Zip: \_\_\_\_\_

**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:**\$** 0**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)Tax Acct. No.: N/A

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## 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, ALEXANDER D. WEST, a legal resident of Oregon and presently residing at 2450 Montelius Street, Klamath Falls, Oregon 97601, hereby make, constitute and appoint JAMIE MICHELLE WEST, residing at 807 NE 115th Circle, Vancouver, Washington 98685, 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:

To make, endorse, receive, sign, seal, execute and acknowledge, and deliver any and all deeds, deeds of trust, notes, settlement statements; any and all disclosure statements including without limitation notice of right to obtain owner's title insurance, interest and truth-in-lending disclosures; loan applications; affidavits; checks; receipts; releases; contract of sale, forms, any and all other documents or instruments of whatever kind and nature; and to take any and all actions necessary to purchase a certain piece, or parcel, of real property known as 1721 Majestic Street Klamath Falls, Oregon 97601 for a purchase price not to exceed \$550000 (Five Hundred Fifty Thousand Dollars and Zero Cents) and with a loan amount not to exceed \$550000 (Five Hundred Fifty Thousand Dollars and Zero Cents). My Attorney-in-Fact shall have full authority to arrange financing upon such terms and conditions, and with such persons and lenders, as my Attorney-in-Fact may deem proper, and to execute all notes and mortgages, insurance policies, and all other actions necessary to secure a loan for the purchase of the property.

**TERMINATION:** This Special Durable Power of Attorney shall terminate on 10th day of February, 2022, 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.

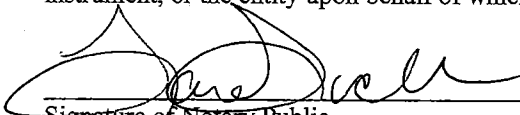
IN WITNESS THEREOF, I have executed this Special Durable Power of Attorney on 10th day of November, 2021.

  
ALEXANDER D. WEST

STATE OF VIRGINIA

COUNTY OF HAMPTON

On 10th day of November, 2021, before me, Tara S. Tucker, a Notary Public, personally appeared ALEXANDER D. WEST, 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 to me that he executed the same in his authorized capacity, and that by his signature on the instrument, or the entity upon behalf of which the person acted, executed the instrument.

  
\_\_\_\_\_  
Signature of Notary Public

My Commission Expires: 8 JAN 2024

