RECORDING COVER SHEET ORS 205.234

This cover sheet has been prepared by:

2022-007360

Klamath County, Oregon 06/13/2022 02:15:01 PM

Fee: \$127.00



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Refere	ence:	· · · · · · · · · · · · · · · · · ·	<u> </u>	=	
Pleas	se print or ty	pe information.			
1.	AFTER RE	CORDING RE	1		
	-	ORS 205.180(4) &	205.238:		7 [/] 7
	Name:	Darla Parks		•	\ '/ F
	Address:	PO Box 81		-	
	City, ST Zip:	Merrill OR 97	633		
_	TITI E/Q\ /	THE TRANS	ACTION(S) - Require	d by ODS 205	23.4/41/6)
2.					be recorded, including, but not limited to, any transfer,
					nter descriptive title for the instrument:
	Document	t Title(s):	Power of Attorney		
				- 1	
J *** 1, 80*	DIRECT D	ADTV / CDANI	OD Nessee and Add	baanaa Da	and the ODS 205 224/41/h
3.			Mortgages/Liens list Borro		equired by ORS 205.234(1)(b)
	Grantor Nan	·	Tim Parks		
	Grantor Nam			•	
	Ciulitai ituli			_	4 1
		ا ــالفــــ			
4.			NTEE Names and Ac Mortgages/Liens list Benef		Required by ORS 205.234(1)(b)
	Grantee Nan		Darla Parks	iciai yr Lei idei r	oledioi
- 1		- 1	Dalla Laiks		
	Grantee Nan	ne:			
_	For an instan	mont convoving or	contracting to convey fee t	title	TRUE AND ACTUAL CONSIDERATION -
5.		n required by ORS		title, 6.	Required by ORS 93.030 for an instrument conveying
	UNTIL A C	HANGE IS RE	QUESTED, ALL		or contracting to convey fee title or any memorandum
			LL BE SENT TO		of such instrument:
	THE FOLL	OWING ADDR	ESS:		\$_0
	Name:	No Change		<u>-</u>	
	Address:				
	City, ST Zip:				
	TAY ACCO			V if the inct	trument creates a lien or other interest that
7.			oreclosure. – Required		
	Tax Acct. No.	- I	•	•	
	, _, , , , , , , , , , , , , , , , , ,	17171			

OREGON DURABLE POWER OF ATTORNEY FORM

J. NOTICE - This legal document grants you (Hereinafter referred to as the "Principal") the right to transfer unlimited financial powers to someone else (Hereinafter referred to as the "Attorney-in-Fact"), unlimited financial powers are described as: all financial decision making power legal under law. The Principal's transfer of financial powers to the Attorney-in-Fact are granted upon authorization of this agreement, and stay in effect in the event of incapacitation by the Principal (incapacitation is described in Paragraph II). This agreement does not authorize the Attorney-in-Fact to make medical decisions for the Principal. The Principal continues to retain every right to all their financial decision making power and may revoke this Durable Power of Attorney Form at anytime. The Principal may include restrictions or requests pertaining to the financial decision making power of the Attorney-in-Fact. It is the intent of the Attorney-in-Fact to act in the Principal's wishes put forth, or, to make financial decisions that fit the Principal's best interest. All parties authorizing this agreement must be at least 18 years of age and acting under no false pressures or outside influences. Upon authorization of this Durable Power of Attorney Form, it will revoke any previously valid Durable Power of Attorney Form.

II. INCAPACITATION - The powers granted to the Attorney-in-Fact by the Principal in this Durable Power of Attorney Form stay in effect upon incapacitation by the Principal, incapacitation is describes as: A medical physician stating verbally or in writing that the Principal can no longer make decisions for them self.

<u>III. REVOCATION</u> - The Principal has the right to revoke this Durable Power of Attorney Form at anytime. Any revocation will be effective if the Principal either:

- A. Authorizes a new Durable Power of Attorney Form.
- B. Authorizes a Power of Attorney Revocation Form.

IV. WITNESS & NOTARY - This document is not valid as a Durable Power of Attorney unless it is acknowledged before a notary public or is signed by at least two adult witnesses who are present when the Principal signs or acknowledges the Principal's signature. It is recommended to have this Durable Power of Attorney Form notarized.

<u>V. PRIN</u>	<u>cipal</u> - 1, <u>T</u>	im Parks residing at
	00 Hill R	Name of Trinapat
		Street Address of Principal
City of	Merrill	State of Oregon, appoint State of Principal
the follo	owing as my al decision m	Attorney-in-Fact, whom I trust with any and all my aking power immediately upon the authorization of this ent that I should become incapacitated:
VI. ATT	ORNEY-IN-F	ACT - Darla Parks Name of Attorney-in-Fact, residing at
2139	0 Hill Rd	
	_	Street Address of Attorney-in-Fact
City of	Merrill	State of Oregon grant State of Attorney-in-Fact
the Attounder la	orney-in-Fac	the legal authority to act on my behalf for any power legal to my financial decisions under the State of
Oreg	gon	
	- 4	TORNEY-IN-FACT (Optional) - If the Attorney-in-Fact named property in the Invalid provided in the Inva
residing	gat 0 Hill Rd	Name of Successor Attorney-in-Fact
		Street Address of Successor Attorney-in-Fact
City of	Merrill	State of Oregon grant
the Atte	orney-in-Fac	Attorney-in-Fact the legal authority to act on my behalf for any power legal to my financial decisions under the State of
Oreg	gon	
	State	•
Fact ac	cepts their c	ITIONS - Upon authorization by all parties, the Attorney-in- esignation to act in the Principal's best interests for all egal under law.
TO GRA	NT ONE OR	MORE, BUT FEWER THAN ALL, OF THE FOLLOWING POWERS,
INITIAL A POWE	THE LINE IN ER, DO NOT I	FRONT OF EACH POWER YOU ARE GRANTING.TO WITHHOLD NITIAL THE LINE IN FRONT OF IT. YOU MAY, BUT

NEED NOT, CROSS OUT EACH POWER WITHHELD.

Note: If you initial Item A or Item B, which follow, a notarized signature will be required on behalf of the Principal.

INITIAL

TP (A) Real property transactions. To lease, sell, mortgage, purchase, exchange, and acquire, and to agree, bargain, and contract for the lease, sale, purchase, exchange, and acquisition of, and to accept, take, receive, and possess any interest in real property whatsoever, on such terms and conditions, and under such covenants, as my Agent shall deem proper; and to maintain, repair, tear down, alter, rebuild, improve manage, insure, move, rent, lease, sell, convey, subject to liens, mortgages, and security deeds, and in any way or manner deal with all or any part of any interest in real property whatsoever, including specifically, but without limitation, real property lying and being situated in the State of California, under such terms and conditions, and under such covenants, as my Agent shall deem proper and may for all deferred payments accept purchase money notes payable to me and secured by mortgages or deeds to secure debt, and may from time to time collect and cancel any of said notes, mortgages, security interests, or deeds to secure debt.

X (B) Tangible personal property transactions. To lease, sell, mortgage, purchase, exchange, and acquire, and to agree, bargain, and contract for the lease, sale, purchase, exchange, and acquisition of, and to accept, take, receive, and possess any personal property whatsoever, tangible or intangible, or interest thereto, on such terms and conditions, and under such covenants, as my Agent shall deem proper; and to maintain, repair, improve, manage, insure, rent, lease, sell, convey, subject to liens or mortgages, or to take any other security interests in said property which are recognized under the Uniform Commercial Code as adopted at that time under the laws of the State of California or any applicable state, or otherwise hypothecate (pledge), and in any way or manner deal with all or any part of any real or personal property whatsoever, tangible or intangible, or any interest therein, that I own at the time of execution or may thereafter acquire, under such terms and conditions, and under such covenants, as my Agent shall deem proper.

TP (C) Stock and bond transactions. To purchase, sell, exchange, surrender, assign, redeem, vote at any meeting, or otherwise transfer any and all shares of stock, bonds, or other securities in any business, association, corporation, partnership, or other legal entity, whether private or public, now or hereafter belonging to me.

X (D) Commodity and option transactions. To organize or continue and conduct any business which term includes, without limitation, any farming, manufacturing, service, mining, retailing or other type of business operation in any form, whether as a proprietorship, joint venture, partnership, corporation, trust or other legal entity; operate, buy, sell, expand, contract, terminate or liquidate any business; direct, control, supervise, manage or participate in the

operation of any business and engage, compensate and discharge business managers, employees, agents, attorneys, accountants and consultants; and, in general, exercise all powers with respect to business interests and operations which the principal could if present and under no disability.

X (E) Banking and other financial institution transactions. To make, receive, sign, endorse, execute, acknowledge, deliver and possess checks, drafts, bills of exchange, letters of credit, notes, stock certificates, withdrawal receipts and deposit instruments relating to accounts or deposits in, or certificates of deposit of banks, savings and loans, credit unions, or other institutions or associations. To pay all sums of money, at any time or times, that may hereafter be owing by me upon any account, bill of exchange, check, draft, purchase, contract, note, or trade acceptance made, executed, endorsed, accepted, and delivered by me or for me in my name, by my Agent. To borrow from time to time such sums of money as my Agent may deem proper and execute promissory notes, security deeds or agreements, financing statements, or other security instruments in such form as the lender may request and renew said notes and security instruments from time to time in whole or in part. To have free access at any time or times to any safe deposit box or vault to which 1 might have access.

(F) Business operating transactions. To conduct, engage in, and otherwise transact the affairs of any and all lawful business ventures of whatever nature or kind that I may now or hereafter be involved in.

X (G) Insurance and annuity transactions. To exercise or perform any act, power, duty, right, or obligation, in regard to any contract of life, accident, health, disability, liability, or other type of insurance or any combination of insurance; and to procure new or additional contracts of insurance for me and to designate the beneficiary of same; provided, however, that my Agent cannot designate himself or herself as beneficiary of any such insurance contracts.

X (H) Estate, trust, and other beneficiary transactions. To accept, receipt for, exercise, release, reject, renounce, assign, disclaim, demand, sue for, claim and recover any legacy, bequest, devise, gift or other property interest or payment due or payable to or for the principal; assert any interest in and exercise any power over any trust, estate or property subject to fiduciary control; establish a revocable trust solely for the benefit of the principal that terminates at the death of the principal and is then distributable to the legal representative of the estate of the principal; and, in general, exercise all powers with respect to estates and trusts which the principal could exercise if present and under no disability; provided, however, that the Agent may not make or change a will and may not revoke or amend a trust revocable or amendable by the principal or require the trustee of any trust for the benefit of the principal to pay income or principal to the Agent unless specific authority to that end is given.

X (I) Claims and litigation. To commence, prosecute, discontinue, or defend all actions or other legal proceedings touching my property, real or

personal, or any part thereof, or touching any matter in which I or my property, real or personal, may be in any way concerned. To defend, settle, adjust, make allowances, compound, submit to arbitration, and compromise all accounts, reckonings, claims, and demands whatsoever that now are, or hereafter shall be, pending between me and any person, firm, corporation, or other legal entity, in such manner and in all respects as my Agent shall deem proper. (J) Personal and family maintenance. To hire accountants, attorneys at law, consultants, clerks, physicians, nurses, agents, servants, workmen, and others and to remove them, and to appoint others in their place, and to pay and allow the persons so employed such salaries, wages, or other remunerations, as my Agent shall deem proper. X (K) Benefits from Social Security, Medicare, Medicaid, or other governmental programs, or military service. To prepare, sign and file any claim or application for Social Security, unemployment or military service benefits; sue for, settle or abandon any claims to any benefit or assistance under any federal, state, local or foreign statute or regulation; control, deposit to any account, collect, receipt for, and take title to and hold all benefits under any Social Security, unemployment, military service or other state, federal, local or foreign statute or regulation; and, in general, exercise all powers with respect to Social Security, unemployment, military service, and governmental benefits, including but not limited to Medicare and Medicaid, which the principal could exercise if present and under no disability. Х (L) Retirement plan transactions. To contribute to, withdraw from and deposit funds in any type of retirement plan (which term includes, without limitation, any tax qualified or nonqualified pension, profit sharing, stock bonus, employee savings and other retirement plan, individual retirement account, deferred compensation plan and any other type of employeebenefit plan); select and change payment options for the principal under any retirement plan; make rollover contributions from any retirement plan to other retirement plans or individual retirement accounts; exercise all investment powers available under any type of self-directed retirement plan; and, in general, exercise all powers with respect to retirement plans and retirement plan account balances which the principal could if present and under no disability. Χ (M) Tax matters. To prepare, to make elections, to execute and to file all tax, social security, unemployment insurance, and informational returns required by the laws of the United States, or of any state or subdivision thereof, or of any foreign government; to prepare, to execute, and to file all other papers and instruments which the Agent shall think to be desirable or necessary for safeguarding of me against excess or illegal taxation or against penalties imposed for claimed violation of any law or other governmental regulation; and to pay, to compromise, or to contest or to apply for refunds in

IX. THIRD PARTIES - I, the Principal, agree that any third party receiving a

connection with any taxes or assessments for which I am or may be liable.

copy via: physical copy, email, or fax that I, the Principal, will indemnify and hold harmless any and all claims that may be put forth in reference to this Durable Power of Attorney Form.

X. COMPENSATION - The Attorney-in-Fact agrees not to be compensated for acting in the presence of the Principal. The Attorney-in-Fact may be, but not entitled to, reimbursement for all: food, travel, and lodging expenses for acting in the presence of the Principal.

XI. DISCLOSURE - I intend for my attorney-in-fact under this Power of Attorney to be treated, as I would be with respect to my rights regarding the use and disclosure of my individually identifiable health information or other medical records. This release authority applies to any information governed by the Health Insurance Portability and Accountability Act of 1996 (aka HIPAA), 42 USC 1320d and 45 CFR 160-164

XII. PRINCIPAL'S SIGN	_{IATURE - I,} Tim P	'arks	the Principal,
		Name of Principal	
sign my name to this	power of attorney thi	s 7day of	
April	and, being fi	rst duly sworn, do	declare to the
undersigned authority attorney and that I sig	gn it willingly, or will	ingly direct anoth	er to sign for me,
that I execute it as m	y free and voluntary	act for the purpos	es expressed in the
power of attorney and			der, of sound mind
and under no constrai	2		7 1
Signature of Principal		Dorlo Dorl	
XIII. ATTORNEY-IN-FA	ACT'S SIGNATURE- I,	Dana Fark	.5
have read the attache	ed power of attorney	and am the perso	n identified as the
attorney-in-fact for tl appointment as Attor	ne principal. I nereby	acknowledge and	i accept my nt I shall evercise
the powers for the be	nefit of the principal	• I shall keen the	assets of the
principal separate fro	m my assets: I shall e	exercise reasonable	le caution and
prudence; and I shall	keep a full and accur	ate record of all	actions, receipts
and disbursements on			•
Jorle Park	es)	4/7/2022	
Signature of Attorney-in-Fact			Date

XIV. SUCCESSOR ATTORNEY-IN-FACT'S SIGNATURE (Optional) I, Dallas Parks have read the attached power of **Mame of successor Actorney-in-Fact** attorney and am the person identified as the successor attorney-in-fact for the principal. I hereby acknowledge that I accept my appointment as Successor Attorney-in-Fact and that, in the absence of a specific provision to the contrary in the power of attorney, when I act as agent I shall exercise the powers for the benefit of the principal; I shall keep the assets of the principal separate from my assets; I shall exercise reasonable caution and prudence; and I shall keep a full and accurate record of all actions, receipts, and disbursements on behalf of the principal. **Dallas Parks** **Additional Parks** **Add

Notary Ack	nowledgement (Must be completed by Notar	у)
Sworn and acknowled Principal, and subscri	County of Hamath ged before me by Ton Parks bed and sworn to before me by	Subscribed, , the
witness, this 7 th	mon day of <u>april</u> 2020	
Notary Signature \(\) Notary Public		OFFICIAL STAMP REBECA IRENE ZAMORA NOTARY PUBLIC - OREGON COMMISSION NO. 984872
In and for the County State of On when	of <u>Klamath</u>	OMMISSION EXPIRES MARCH 10,
	s: March 10, 2023 Seal	<i>J</i>
Acknowledgement an	d Acceptance of Appointment as Attorney-in	i-Fact
I, Darla Par	have read the attached power of	of attorney
and am the person ide acknowledge that acc act as agent I shall ex	entified as the attorney-in-fact for the principal ept my appointment as Attorney-in-Fact and the ercise the powers for the benefit of the principal principal separate from my assets; I shall exe	nat when Í pal; I shall
reasonable caution an	d prudence; and I shall keep a full and accurated by the principal.	e of all
Signature of Attorney-in-Fact	417/22 Pate	_3
Acceptance	of Appointment as successor Attorney-in-Fa-	ct
, Dallas Par	kς have read the attached power of	
attorney and am the p principal. I hereby ack	erson identified as the successor attorney-in-f mowledge that I accept my appointment as Suc	ccessor
	hat, in the absence of a specific provision to t ey, when I act as agent I shall exercise the pov	
the benefit of the prin from my assets; I shall keep a full and accura	cipal; I shall keep the assets of the principal so exercise reasonable caution and prudence; ar te record of all actions, receipts, and disburse	eparate nd I shall
Dallow Bulky	4/7/22	
Signature of Successor Attorn	ey-in-Fact Date	

Witness Attestation

	witness Attestation
Printed Name of First We the second witness, so first duly sworn and comprincipal signs and expresence and hearing the principal's signing eighteen years of age	thess, the first witness, and I Chelsea Ogsady Printed Name of Second Witness ign my name to the foregoing power of attorney being to not declare to the undersigned authority that the ecuted this instrument as him or her, and that I, in the of the principal, sign this power of attorney as witness to g and that to the best of my knowledge the principal is or older, of sound mind and under no constraint or undue
influence.	Chalsea CVIII males
Signature of First Witness	Signature of Second Witness