



After Recording Return to:  
David Thompson  
P.O. Box 660626  
Arcadia, CA 91006

2025-006539

Klamath County, Oregon



00345262202500065390020021

07/28/2025 04:08:27 PM

Fee: \$92.00

LIMITED POWER OF ATTORNEY

I, Elizabeth Jane Thompson of Arcadia, California, appoint my husband, David Robert Thompson, or my son, Keith Michael Thompson, or my son, Kenneth David Thompson, and each of them, with the authority to act independently of each other, my Agents and attorney-in-fact (collectively "my Agent"), each with the power and authority to:

- Managing and sale of Real Property. Take possession of, retain, manage, maintain, improve, lease, grant options on, encumber, sell, purchase, exchange, deed or otherwise acquire or dispose of any of my real property or any interest in real property, in any manner and on any terms my Agent considers to be in my best interests.
- Title Companies and Financial Institutions. Enter into any transaction with and contract for any services rendered by title companies and financial institutions to accommodate the sale of real property, including endorsing, or depositing checks, drafts, and other negotiable instruments and execute consents, closing agreements, and other documents related to my real property.
- Taxes and Assessments. Pay any real property or transfer tax or assessment; appear for and represent me, in person or by attorney, in all tax matters relating to real property; execute any power of attorney forms required by the Internal Revenue Service, the Oregon Department of Revenue, or any other taxing authority and to receive confidential information from any taxing authority.
- 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 under this power of attorney, as fully as I might do personally. I ratify and confirm all acts performed pursuant to this power of attorney.
- 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.
- 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.
- 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 23 day of July, <sup>2025</sup>~~2023~~

See Notary Attachment

Elizabeth Jane Thompson  
Elizabeth Jane Thompson

## ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California  
County of Los Angeles )

On July 23rd 2025 before me, Darlene D. Diaz, Notary Public  
(insert name and title of the officer)

personally appeared Elizabeth Jane Thompson,  
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 Darlene D. Diaz (Seal)

