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Until a change is requested all tax statements shall be sent to the following address.

After recording return to:

KFFSYL

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SPACE RESERVED

SS. County of I certify that the within instrument was received for record on theday of ______, 19____,

in book reel/volume No.....on page.....or as document/fee/file/ instrument/microfilm No....., Record of Deeds of said county.

Witness my hand and seal of County affixed.

NAME			
■ Control of the	NAME		TITLE

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5. Covenants, easements and restrictions, but omitting restrictions, if any, based on race, color, religion or national origin, imposed by instrument, including the terms thereof,

Recorded: March 10, 1940 Book: 127 Page: 509

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