

1-1-74

97375

WARRANTY DEED

Vol. M81 / Page 5025



KNOW ALL MEN BY THESE PRESENTS, That Sylvan B. Crume, Sr.

hereinafter called the grantor, for the consideration hereinafter stated, to grantor paid by Lillian W. Crume for her children, who are grantees, Cassie Crume, Sylvan Crume, III, James Wilson Wahtah, hereinafter called the grantee, does hereby grant, bargain, sell and convey unto the said grantee and grantee's heirs, successors and assigns, that certain real property, with the tenements, hereditaments and appurtenances thereunto belonging or appertaining, situated in the County of Klamath and State of Oregon, described as follows, to-wit:

Lots 18 and 19, Block 2, JUNIPER ACRES, in the County of Klamath, State of Oregon

Each an undivided one third interest with the right of survivorship, reserving a life estate to Sylvan B. Crume, Sr. for the term of Sylvan B. Crume Sr.'s life,

(IF SPACE INSUFFICIENT, CONTINUE DESCRIPTION ON REVERSE SIDE)

To Have and to Hold the same unto the said grantee and grantee's heirs, successors and assigns forever.

And said grantor hereby covenants to and with said grantee and grantee's heirs, successors and assigns, that grantor is lawfully seized in fee simple of the above granted premises, free from all encumbrances

except easements and restrictions of record and those apparent on the face of the land

and that grantor will warrant and forever defend the said premises and every part and parcel thereof against the lawful claims and demands of all persons whomsoever, except those claiming under the above described encumbrances.

The true and actual consideration paid for this transfer, stated in terms of dollars, is \$ 6823.40

However, the actual consideration consists of or includes other property or value given or promised which is the whole part of the consideration (indicate which). (The sentence between the symbols ©, if not applicable, should be deleted. See ORS 93.030.)

In construing this deed and where the context so requires, the singular includes the plural and all grammatical changes shall be implied to make the provisions hereof apply equally to corporations and to individuals.

In Witness Whereof, the grantor has executed this instrument this 18 day of March, 1981; if a corporate grantor, it has caused its name to be signed and seal affixed by its officers, duly authorized thereto by order of its board of directors.

(If executed by a corporation,
affix corporate seal)

Sylvan B. Crume Sr.
Sylvan B. Crume Sr.

STATE OF OREGON,)
County of Klamath) ss.
March 18, 1981

Personally appeared the above named

Sylvan B. Crume Sr.

and acknowledged the foregoing instrument to be his voluntary act and deed.

Before me,
(OFFICIAL SEAL)

Notary Public for Oregon

My commission expires: 11-6-83

STATE OF OREGON, County of) ss.
March 18, 1981

Personally appeared) and

who, being duly sworn,
each for himself and not one for the other, did say that the former is the
president and that the latter is the
secretary of

a corporation,
and that the seal affixed to the foregoing instrument is the corporate seal
of said corporation and that said instrument was signed and sealed in be-
half of said corporation by authority of its board of directors; and each of
them acknowledged said instrument to be its voluntary act and deed.

Before me:

(OFFICIAL
SEAL)

Notary Public for Oregon

My commission expires:

Sylvan B. Crume, Sr.

Sprague River

Oregon 97639

GRANTOR'S NAME AND ADDRESS

Lillian W. Crume for children

P.O. Box 6

Sprague River, OR 97639

GRANTEE'S NAME AND ADDRESS

After recording return to:

Steven P. Couch

220 Main Street, Suite 1-D

Klamath Falls, OR 97601

NAME, ADDRESS, ZIP

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

Lillian W. Crume

P.O. Box 6

Sprague River, OR 97639

NAME, ADDRESS, ZIP

STATE OF OREGON,

County of Klamath) ss.

I certify that the within instru-
ment was received for record on the
19th day of March, 1981,
at 3:42 o'clock P.M., and recorded
in book/reel/volume No. M81 on
page 5025 or as document/fee/file/
instrument/microfilm No. 97375,
Record of Deeds of said county.

Witness my hand and seal of
County affixed.

Evelyn Biehn County Clerk.

By Debra A. Jensen Deputy
Fee \$3.50

SPACE RESERVED
FOR
RECORDER'S USE

Investigation		22a. EMPLOYER'S NAME		22b. DATE		22c. NAME OF FUNERAL HOME		22d. NAME OF FUNERAL HOME		22e. NAME OF FUNERAL HOME		22f. NAME OF FUNERAL HOME		22g. NAME OF FUNERAL HOME		22h. NAME OF FUNERAL HOME		22i. NAME OF FUNERAL HOME		22j. NAME OF FUNERAL HOME		22k. NAME OF FUNERAL HOME		22l. NAME OF FUNERAL HOME		22m. NAME OF FUNERAL HOME		22n. NAME OF FUNERAL HOME		22o. NAME OF FUNERAL HOME		22p. NAME OF FUNERAL HOME		22q. NAME OF FUNERAL HOME		22r. NAME OF FUNERAL HOME		22s. NAME OF FUNERAL HOME		22t. NAME OF FUNERAL HOME		22u. NAME OF FUNERAL HOME		22v. NAME OF FUNERAL HOME		22w. NAME OF FUNERAL HOME		22x. NAME OF FUNERAL HOME		22y. NAME OF FUNERAL HOME		22z. NAME OF FUNERAL HOME					
FUNERAL DIRECTOR AND LOCAL REGISTRAR		23. NAME OF FUNERAL HOME		24. NAME OF FUNERAL HOME		25. NAME OF FUNERAL HOME		26. NAME OF FUNERAL HOME		27. NAME OF FUNERAL HOME		28. NAME OF FUNERAL HOME		29. NAME OF FUNERAL HOME		30. NAME OF FUNERAL HOME		31. NAME OF FUNERAL HOME		32. NAME OF FUNERAL HOME		33. NAME OF FUNERAL HOME		34. NAME OF FUNERAL HOME		35. NAME OF FUNERAL HOME		36. NAME OF FUNERAL HOME		37. NAME OF FUNERAL HOME		38. NAME OF FUNERAL HOME		39. NAME OF FUNERAL HOME		40. NAME OF FUNERAL HOME		41. NAME OF FUNERAL HOME		42. NAME OF FUNERAL HOME		43. NAME OF FUNERAL HOME		44. NAME OF FUNERAL HOME		45. NAME OF FUNERAL HOME		46. NAME OF FUNERAL HOME		47. NAME OF FUNERAL HOME		48. NAME OF FUNERAL HOME		49. NAME OF FUNERAL HOME		50. NAME OF FUNERAL HOME	
CAUSE OF DEATH		25. NAME OF FUNERAL HOME		26. NAME OF FUNERAL HOME		27. NAME OF FUNERAL HOME		28. NAME OF FUNERAL HOME		29. NAME OF FUNERAL HOME		30. NAME OF FUNERAL HOME		31. NAME OF FUNERAL HOME		32. NAME OF FUNERAL HOME		33. NAME OF FUNERAL HOME		34. NAME OF FUNERAL HOME		35. NAME OF FUNERAL HOME		36. NAME OF FUNERAL HOME		37. NAME OF FUNERAL HOME		38. NAME OF FUNERAL HOME		39. NAME OF FUNERAL HOME		40. NAME OF FUNERAL HOME		41. NAME OF FUNERAL HOME		42. NAME OF FUNERAL HOME		43. NAME OF FUNERAL HOME		44. NAME OF FUNERAL HOME		45. NAME OF FUNERAL HOME		46. NAME OF FUNERAL HOME		47. NAME OF FUNERAL HOME		48. NAME OF FUNERAL HOME		49. NAME OF FUNERAL HOME		50. NAME OF FUNERAL HOME					
INJURY INFORMATION		33. SPECIFY ACCIDENT, SUICIDE OR HOMICIDE		34. PLACE OF INJURY		35. INJURY AT WORK		36. DATE OF INJURY		37. PLACE OF INJURY		38. INJURY AT WORK		39. DATE OF INJURY		40. PLACE OF INJURY		41. INJURY AT WORK		42. DATE OF INJURY		43. PLACE OF INJURY		44. INJURY AT WORK		45. DATE OF INJURY		46. PLACE OF INJURY		47. INJURY AT WORK		48. DATE OF INJURY		49. PLACE OF INJURY		50. INJURY AT WORK		51. DATE OF INJURY		52. PLACE OF INJURY		53. INJURY AT WORK		54. DATE OF INJURY		55. PLACE OF INJURY		56. INJURY AT WORK		57. DATE OF INJURY		58. PLACE OF INJURY		59. INJURY AT WORK		60. DATE OF INJURY	
COUNTY OF KLAMATH: ss.		33. SPECIFY ACCIDENT, SUICIDE OR HOMICIDE		34. PLACE OF INJURY		35. INJURY AT WORK		36. DATE OF INJURY		37. PLACE OF INJURY		38. INJURY AT WORK		39. DATE OF INJURY		40. PLACE OF INJURY		41. INJURY AT WORK		42. DATE OF INJURY		43. PLACE OF INJURY		44. INJURY AT WORK		45. DATE OF INJURY		46. PLACE OF INJURY		47. INJURY AT WORK		48. DATE OF INJURY		49. PLACE OF INJURY		50. INJURY AT WORK		51. DATE OF INJURY		52. PLACE OF INJURY		53. INJURY AT WORK		54. DATE OF INJURY		55. PLACE OF INJURY		56. INJURY AT WORK		57. DATE OF INJURY		58. PLACE OF INJURY		59. INJURY AT WORK		60. DATE OF INJURY	
COUNTY OF KLAMATH: ss.		33. SPECIFY ACCIDENT, SUICIDE OR HOMICIDE		34. PLACE OF INJURY		35. INJURY AT WORK		36. DATE OF INJURY		37. PLACE OF INJURY		38. INJURY AT WORK		39. DATE OF INJURY		40. PLACE OF INJURY		41. INJURY AT WORK		42. DATE OF INJURY		43. PLACE OF INJURY		44. INJURY AT WORK		45. DATE OF INJURY		46. PLACE OF INJURY		47. INJURY AT WORK		48. DATE OF INJURY		49. PLACE OF INJURY		50. INJURY AT WORK		51. DATE OF INJURY		52. PLACE OF INJURY		53. INJURY AT WORK		54. DATE OF INJURY		55. PLACE OF INJURY		56. INJURY AT WORK		57. DATE OF INJURY		58. PLACE OF INJURY		59. INJURY AT WORK		60. DATE OF INJURY	

I hereby certify that the within instrument was received and filed for record on the 19th day of March A.D., 1981 at 3:42 o'clock P.M., and duly recorded in Vol M81 of Deeds on page 5026.
Fee \$3.50

Fee \$3.50

EVELYN BIEHN
COUNTY CLERK

By Robert A. Jones Deputy