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183	Paga	4620	4

KNOW ALL MEN BY THESE PRES	SENTS. That FIENDER	Vol. 183 Page	4620 9
for the consideration hereinafter stated de-	ELCANOR B.	REYNOLDS	3 1000
for the consideration hereinafter stated, does h LORRAINE M. MITCHELL hereinafter called grantee, and unto grantee's	nereby grant, bargain, sell and	convey unto	r called grantor,
hereinafter called grantee, and unto grantee's tenements, hereditaments and appurtenances of Klamath , State of Oregon.	heirs, successors and assigns	all of the	
,	thereunto belonging or in any described as follows, to-wit:	wise appertaining, situate	operty with the
All that ports			

All that portion of Government Lot 5, Section 5, Township 35 South, Range 7 East of the Willamette Meridian, Klamath County, Oregon, lying Southwesterly of State High-

In construing this deed and where the contact changes shall be implied to make the provisions he in Witness Whereof, the grantor has execute if a corporate grantor, it has caused its name to be order of its board of directors.	stence between the symbol ext so requires, the si ereof apply equally the details instrument the signed and seal after the	ingular includes the plural and all see ORS 93.030.)
(If executed by a corporation, affix corporate seal)		
STATE OF OREGON,	07	
County of Klamath ss.	STATE OF OREGO	N, County of) ss.
February 165, 19, 83.	Personalla	, 19) ss.
	appe	ared and
Personally appeared the above named	each for himself and i	not one for the attwho, being duly sworn,
		president and that the latter is the
ment to be her voluntary act and deed.		Secretary of
(OFFICIAL State of SEAL) Notary Public for Oregon My commission expires 7/3/85	them acknowledged sai Before me:	by authority of its board of directors; and each of instrument to be its voluntary act and deed. (OFFICIAL
to the control of the		CT 4 Th
CRANTOR'S NAME AND ADDRESS Lorraine M. Mitchell Star Route 1, Box 21 C Chiloquin, Oregon 97624		County of Klamath I certify that the within instrument was received for record on the 29th day of March 19 83
GRANTEE'S NAME AND ADDRESS	SPACE RESERVED	ar o'clock P ne
	FOR	in book reel volume No. M83
Per Grantee	RECORDER'S USE	
The same of the sa		
NAME, ADDRESS, ZIP		Deeds of said county
till a change is requested all tax statements shall be sent to the following address.		Witness my hand and seal of County affixed.
Per Grantee		Evelyn Biehn CountyClerk
NAME, ADDRESS, ZIP		By Car Deputy