FOR

RECORDER'S USF

page 10963 or as fee/file/instru-

ment/microfilm/reception No.38265

Evelyn Biehn, County Clerk

Witness my hand and seal of

Record of Deeds of said county.

County affixed.

Mr. and Mrs. Jensen

Klamath Falls, OR 97601

NAME, ADDRESS, ZIP

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

NAME, ADDRESS, ZIP

1517 Gary Street

James as alon