| * 44027  | THE ENTIRETY—Humband to Wife or Wife to | Vol. Na Cal Barrers Comments  |
|--|---|---|
| KNOW ALL MEN BY THE (hereing sideration hereinalter stated hereinalter | Servin, I hat                           | THE ENTIRETY  OF THE ENTIRETY  I Special Fine Long  spouse of the grantee hereinafter named, for the con- y these preserts down                                     |
| an undivided one-half of the follo   | wing described real property            | (herein called the grantma)   |
| ·  |   | CACT No 1516,   |
| Green  | Acres                                   | , ,   |
| i<br><del>-</del> .  |   |   |
| . •  |   |   |
| on Store ( ) To  |   |   |
| * Weekend 1. The   | ^~                                      |   |
|  |   |   |
| together with all and singular the   | TATE NO SET ON THE SET OF               | en jaron en araba en j  |
| TO HAVE AND TO HOLD  | said undivided one.ks/4-4               | or is, is, is, and is a property of appurite names, thereunto, belongery, or in anywise, and real property unto the said granter forever, if of said real property. |
| to said real property  | d there hereby is created an            | estate by the entirery been and it is the intent and pur-   |
| However the actual consider  | ation paid for this transfer.           | Stated in terms of the  |
| WITNESS granter's hand this  |   |   |
| CT 1   | CE.                                     | Atland P +  |
| STATE OF OREGON, County of<br>Personally appeared the above<br>who is known to me to be the spouse<br>to be voluntary act and dued   | 766                                     | deed and acknowledged the foregoing instrument  |
| (Official Seal)  | シーン まれんしんしょせん                           | en trader   |
| The state of the s | Notary Public for Oregor                | n-My commission expires.  |
|  |   | STATE OF OREGON.  |
| GRANTOR IS NAME AND ADDRESS  | •                                       | County of Marath  |
|  |   | I certify that the within instru-<br>ment was received for record on the  |
| THANTS OF NAME AND ADDRESS.  After recording return to:  | SPACE RES                               | at 110 o'clock M, and recorded in book 100 on page 2.77 or as   |
| Signal America   | #1 PC: 3#                               | rest number   |
| NAME ADDRESS 2.0   |   | Record of Deeds of said county.  Witness my hand and seal of County affixed.  |
| ntti a change is requested all tex statements shall be sent to   | the following address.                  | Evelin Siebn County of at   |
| <del></del>  | 1                                       | By Min Lin Of Deputy  |
| NAME ADDRESS, 2 P  | Ten: 77.8                               | Deputy .  |