FORM No DEED, WARRANTY (Survivorship) () und or Corports. SEP 75 AHI 32 Vol. 1185 Page 1562 1-1.74 53756 KNOW ALL MEN BY THESE PRESENTS, That John M. Schonver. 7740 Cannon Street, Klamath Falls, Oregon 97601, hereinafter called the grantor, for the consideration hereinafter stated to the grantor paid by Em11 R. Blom & Roselea Blom H&W 31236 Valley View Lane, Cottage Grove, Oregon 97424 hereinatter called grantees, hereby grants, bargains, sells and conveys unto the said grantees, not as tenants in common but with the right of survivorship, their assigns and the heirs of the survivor of said grantees, all of the following described real property with the tenements, hereditaments and appurtenances thereunto belonging or in any wise Lot #42: $E_{\frac{1}{2}}^{\frac{1}{2}} NE_{\frac{1}{4}}^{\frac{1}{4}} SR_{\frac{1}{4}}^{\frac{1}{4}} Section 19, TWP25S R8E W.M. Five acres M or L.$ Subject to a thirty foot (30 ft.) wide easement on North bound-ary, and fifteen foot (15 ft.) wide easement on West boundary for roadway purposes. Subject to utility easement. Subject to TO HAVE AND TO HOLD the above described and granted premises unto the said grantees, their assigns and the heirs of such survivor, forever; provided that the grantees herein do not take the title in common but with the right of survivorship, that is, that the fee shall vest absolutely in the survivor of the grantees. And the grantor above named hereby covenants to and with the above named grantees, their heirs and assigns, that grantor is lawfully seized in fee simple of said premises, that same are free from all encumbrances 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 \$1.950.07. 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 6th. day of February if a corporate grantor, it has caused its name to be signed and seal affixed by its officers, duly authorized thereto by , 19.78; (If executed by a corporation affix corporate seal) STATE OF OREGON, STATE OF OREGON, County of... County of KLAMATH February 6, 19.78 .., 19..... Personally appeared ... Personally appeared the above named each ior himself and not one for the other, did say that the former is the John M. Schoonoverpresident and that the latter is the 11. 7 and acknowledged the foregoing instru-..... secretary of ment to bes this and that the seal affixed to the foregoing instrument is the corporation, 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:voluntary act and deed. تتخنه 0 Béfore me OFFICIALE SC lella Notary Public for Oregon (OFFICIAL Notary Public for Oregon My commision expires 1/28/82 SEAL) 400 My commission expires: John M. Schoonover 7740 Cannon Street Klamath Falls, Oregon 97601 STATE OF OREGON. GRANTOR'S NAME AND ADDRESS Emil R. Blom & Roselea Blom, H&W ss. County of Klamath 31236 Valley View Lane I certify that the within instru-Cottage Grove, Oregon 97424 GRANTEE'S NAME AND ADDRESS ment was received for record on the 26th day of September 19 85 After recording return to: o'clock A. M., and recorded SPACE RESERVED Mr. & Mrs. Emil R. Blom in book M85 on page 1562 file/reel number 53756 FOR 31236 Valley View Lane, RECORDER'S USE Cottage Grove, Oregon NAME, ADDRESS, ZIP Record of Deeds of said county. Witness my hand and seal of ntil a change is requested all tax statements shall be sent to the following Mr. & Mrs. Emil R. Blom County affixed. 31236 Valley View Lane, Evelyn Biehn, County Clerk Cottage Grove, Oregon 97424 .Recording Officer By TAm don th NAME, ADDRESS, ZIP Deputy Fee: \$5.00

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