FOR

GRANTEE'S NAME AND ADDRESS Klamath County Title Company Collection Escrow #4293 NAME, ADDRESS, ZIP ox statements shall be sent to the fell-Daniel & Margaret Fiorito 2632 Bly Street Klanath Falls, OR 9

I certify that the within instrument was received for record on the đay /...., 19....., at SPACE RESERVED page er as fee/file/instru-RECORDER'S USE ment/microfilm/reception No..... Record of Deeds of said county. Witness my hand and seal of County affixed. NAME TITLE

TICOR TITLE INSURANCE

(Individual)

STATE OF CALIFORNIA YOU

before me, the undersigned, a Notary Public in and for COUNTY OF _ said State, personally appeared Stephen San Filippo August 15, 1986

, personally known to me or proved to me on the basis of setisfactory evidence to be the person_whose name_i3_subscribed to the within instrument and acknow edged that he executed the same.
WITNESS my fund and official seel.

PATRICIA D. FRYER
NOTARY PUBLIC-CALIFORNIA
Principal Office in SISKIYOU COUNTY
My Commission Expires Mar. 10, 1987 OFFICIAL BEAL

(This area for official notarial scal)

STATE OF OREGON: COUNTY OF KLAMATH:

Signature J

the _____19th o'clock A M., and duly recorded in Vol. M86 Filed for record at request of A.D., 19 _ 86 at _ 9:26 on Page ____14757_ County Clerk August Deeds Evelyn Biehn, of _ Dam Ву

\$9.00 FEE

3.55.654

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Courty (Miller)

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Company of Proceedings High Seas ala Seas Manach Falls