| FORM SASE ASSOCIMENT OF REAL ESTATE CONTRACT by V. | andar-Buyer |
|---|--|
| MTC-12987K | ATTEVENTMETOCAN AND CO. LOCALLANDA |
| KNOW ALL MEN BY THESE P | RESENTS, That the undersigned, for the consideration hereinafter sta |
| has sold and assigned and hereby does to | |
| | |
| BIRCH CHIROPRACTIC CORPORATIO | N. a California corporation |
| | |
| December 19 to 75 | terest in and to that certain contract for the sale of real estate dat |
| AS seller and WAYNE A MIMOU | |
| assigned to Lorraine M. Mitchell, and L(Garcia Memorandum. Mitchell, | ORRAINE M. MITCHELL, husband and wife, subsequently who subsequently assigned to Vincent Construction |
| in Health XXXX | ed* Miscellancourt D |
| tion No | hage 101/1 County, Orego |
| Signed hereby over 1 | of the undersideed in a 1 , and a second control of the capital of |
| price thereof is not | Ded in said contract of t |
| luriner, upon compliant | With interest naid the purchas |
| The true and is | le order of said assignee. |
| KARAKAYAYA MAXYAYAYAYAYAYAYAYAYAYAYAYAYAYAYAYAYAYAY | or this transfer, stated in terms of dollars, is \$ 110,000.00 |
| In an and an | XXXXXXX |
| mean and include the plural, the masculine sh matical changes shall be made assumed | AXXXXX rstood that if the context so requires, the singular shall be taken to all include the teminine and the neuter and that generally all gram- mplied to make the provisions hereof apply equally to |
| -, or corporations. | solutions hereof and solutions all gram- |
| Corporation, it has caused its corporate name t | signed assignor has hereunto set his hand; if the undersigned is a o be signed and its corporate seal to be affixed hereunto by it. |
| | |
| HIS INSTRUMENTED 1 / | - X Ument Dans |
| HECKIBED IN THIS INSTRUMENT A PUWER | PERTY $\Lambda / \gamma \alpha$ |
| HECK WITH THE APPROPRIATE CITY OR CO LANNING DEPARTMENT TO VERIFY APPROVED | JUNTY LIGHTAINE GARCIA aka Lorraine M. Garcia aka |
| CATE OF XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX | Lorraine A. Garcia |
| County of CLKO 55. | STATE OF OREGON, County of) 55. |
| Personally | |
| NCENT GARCIA and LORRAINE A. GARCIA | each for himself and not one for the attention who, being duly sworn |
| and action if a | secretary of |
| and acknowledged the foregoing instru- | and that the seal affixed to the foregoing instrument is at |
| FICIAL BARBI JARED | half 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: |
| Line Courty, North Public AND Disclose 6 (1990 | |
| Entra 2018-5,19,30 | Notary Public for Oregon (OFFICIAL My commission expires: SEAL) |
| whichever word not applicable. NOTE—The sentence between the syn , it should be recorded, preferably in the Decd Record | (If executed by a corporation, affix corporate seal) mbals (), if not applicable, should be deleted. See ORS 93,030. If the contract is not already of |
| | . Jee Ox3 93,030. If the contract is not already of |
| TIME CARDER DING | |
| A-2 | |
| DENT GARCIA and LORRAINE A. GARCIA A-2 NV 89829 | STATE OF OREGON, |
| CENT GARCIA and LORRAINE A. GARCIA A-2 NV 89829 GRANTOR'S NAME AND ADDRESS H CHIROPRACTIC CORDON ADDRESS | County ofKlamath |
| CENT GARCIA and LORRAINE A. GARCIA A-2 NV 89829 GRANTOR'S NAME AND ADDRESS CH CHIROPRACTIC CORPORATION Box 393 Oquin, OR 97624 | County ofKlamath ss. I certify that the within instrument was received for record on the 30th day ofDecember |
| DENT GARCIA and LORRAINE A. GARCIA A-2 NV 89829 GRANTOR'S NAME AND ADDRESS H CHIROPRACTIC CORPORATION Box 393 oquín, OR 97624 GRANTEE'S NAME AND ADDRESS Cording relum to: | County ofKlamath ss. I certify that the within instrument was received for record on the 30th day ofDecember |
| DENT GARCIA and LORRAINE A. GARCIA A-2 NV 89829 GRANTOR'S NAME AND ADDRESS H CHIROPRACTIC CORPORATION Box 393 Oquín, OR 97624 GRANTEE'S NAME AND ADDRESS fording return to: TAIN TITLE COMPANY OF WE GRANT | County ofKlamath ss. I certify that the within instrument was received for record on the 30th day ofDecember |
| CENT GARCIA and LORRAINE A. GARCIA A-2 OFFANTOR'S NAME AND ADDRESS CH CHIROPRACTIC CORPORATION Box 393 Oquin, OR 97624 OFFANTEE'S NAME AND ADDRESS Cording return to: TAIN TITLE COMPANY OF KLAMATH COUNTY Main Street ath Falls, OR 97601 | SPACE RESERVED FOR RECORDER'S USE County ofKlamath I certify that the within instrument was received for record on the 30th day ofDecember |
| CENT GARCIA and LORRAINE A. GARCIA A-2 GRANTOR'S NAME AND ADDRESS CH CHIROPRACTIC CORPORATION Box 393 Oquín, OR 97624 GRANTEE'S NAME AND ADDRESS Cording return to: TAIN TITLE COMPANY OF KLAMATH COUNTY Main Street AMME, ADDRESS, 21P MAME, ADDRESS, 21P | County ofKlamath ss. I certify that the within instrument was received for record on the 30th day ofDecember |
| CENT GARCIA and LORRAINE A. GARCIA A-2 GRANTOR'S NAME AND ADDRESS CH CHIROPRACTIC CORPORATION Box 393 Oquín, OR 97624 GRANTEE'S NAME AND ADDRESS Cording return to: TAIN TITLE COMPANY OF KLAMATH COUNTY Main Street AMME, ADDRESS, 21P MAME, ADDRESS, 21P | County ofKlamath ss. I certify that the within instrument was received for record on the 30th day ofDecember |
| CENT GARCIA and LORRAINE A. GARCIA A-2 GRANTOR'S NAME AND ADDRESS CH CHIROPRACTIC CORPORATION Box 393 oquín, OR 97624 GRANTEE'S NAME AND ADDRESS Cording relum to: TAIN TITLE COMPANY OF KLAMATH COUNTY Main Street Ath Falls, OR 97601 NAME ADDRESS | County ofKlamath ss. I certify that the within instrument was received for record on the 30th day ofDecember |

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