| | #M31504-Order N | | 7000 | |
|----------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|
| | TITLE & ESCROW | | Fage 5923 | |
| 86337 | TITLE & ESCROW | NDIVIDUAL) | | |
| | ET and ELIDA LEGGET, husbar | nd and wife | , hereinafter called grantor, | |
| DONALD J. LEGG | ET and ELIDA moet | oration | real property situated in the | |
| convey(s) to WESTER | N BANK, an Oregon banking corpo | all that | | |
| County of Klamat | h, State of Oregon, 20 | DIVISION TRAC | r 1235, in | |
| Ene Councy - | | | | |
| SUBJECT TO: 1. Restriction: 2. Subject to | s as shown on the recorded plat. rules and regulations of Fire Pat s and restrictions as contained | trol District. in Deed recorded | in Volume 175 at | |
| a Reservation | s and restrictions as contained of Conditions and Restrictions, 4651, and as Amended in Book M- % rty Taxes, plus interest. | | 14, 1987 in Book | |
| M-87 at page 1 5. Real Prope | rty Taxes, plus interest. | | | |
| <u>/-</u> | ALLOW USE OF THE PROPERTY DESCRIBED IN THIS INSTRUM INSTRUMENT, THE PERSON ACQUIRING FEE TITLE TO THE PROPE USES." | ENT IN VIOLATION OF APPLICAE RTY SHOULD CHECK WITH THE | BLE LAND USE LAWS AND REGULATIONS. BEFORE APPROPRIATE CITY OR COUNTY PLANNING DEPART | |
| THIS INSTRUMENT WILL NOT S.Shing CR ACCEPTING THIS MENT TO VERIFY APPROVED | ALLOW USE OF THE PROPERTY DESCRIBED IN THE PROPE INSTRUMENT, THE PERSON ACQUIRING FEE TITLE TO THE PROPE USES." IT DOES NOT GUARANTEE THAT ANY PA IS INSTRUMENT, A EUYER SHOULD CHEC INT TO VERIFY APP ROVED USES. | ARTICULAR USE MA | Y BE MADE OF THE PROPERTY OPRIATE CITY OR COUNTY PLAN | |
| THIS INSTRUMEN DESCRIBED IN THI NING DEPARTMEN | IS INSTRUMENT. A EUYER SHOULD CHEN | described property | free of all encumbrances excep | nt |
| and covenant(s) the set forth | hat grantor is the owner of the above hereinabove | La stally claif | | ····································· |
| and will warrant a | nd defend the same against all persons w | ho may lawing orden | ExchangeHowever, the actual co | in- on |
| The true | nd defend the same against all persons w e and actual consideration for this trans its of or includes other property or value (Delete between symbols°, if not applie struing this deed and where the context NESS WHEREOF, the grantor has executed | e given or promised | 30) | , |
| IN WIT | NESS WHEREOF, the grantor has one | λ | A Legset | |
| 19 <u>58</u> | | Donald | la Legget | |
| | ut any th | Elida Legg)ss. | | |
| STATE OF ORE | GON, County of <u>Klamath</u> March 10, 198 onally appeared the above named <u></u> | 8. Donald J. Leg | get and Elida Legget and acknowledged the foreg | joing |
| Perso | onally appeared the above named | tood () | and acknowledged the | |
| instrument to | be their voluntary act and t | meed. | me To Addington | |
| | Deix | Notary Publ My Commis | ic for <u>Oregon</u> $\begin{bmatrix} 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ - 0 \\ $ | |
| | | | STATE OF OREGON, | SS. |
| Donald J | . & Elida Legget | | County of <u>Klamath</u> I certify that the within ins | trument |
| | GRANIORS NAME AND ADDRESS | | was received for record on the | 988 |
| Western | Rank | | at 4:15 001000 1100 | on |
| | GRANTEE'S NAME AND ADDIRESS | SPACE RESERVED FOR | page01 as docum | 37, |
| Atter recording re | Bank, Special ASSEL IA P | RECORDER'S USE | Record of Deeds of said county. Witness my hand and seal of | of County |
| <u>P.O. BC</u> | 0R 97420 | | affixed. | |
| LOOS Do | requested all tax statements shall be sent to the relieves | | <u>Evelyn Biehn, -Count</u> NAME Byz <i>jessetha Abelez</i> | V CLETI |
| Wester P.O. B | ox 1377 | | By Sernetha Ablet | H_ Deputy |
| Until a change is Wester P.O. B Coos E | NAME, ADDRESS, ZIP | . | ee \$10.00 | FORM 685-2.5M |
| | | F | 66 210.00 | |