66855



CLIFFORD ALLSTOTT

, hereinafter called grantor,

6814

convey(s) to _____JOHN A. SABORI and CYNTHIA A. SABORI, husband and wife _ all that real property situated in the

County of ____Klamath_____, State of Oregon, described as:

Lot "C", Block 68, NICHOLS ADDITION TO THE CITY OF KLAMATH FALLS, Supplemental Plat of Lots 6, 7 and 8, Block 67, Lots 1, 2 and 3, Block 68 and Lots 1, 2 and 5, Block 69 of Nichols Addition, in the County of Klamath, State of Oregon.

SUBJECT TO:

1. Conditions, restrictions as shown on the recorded plat. 2. Regulations, including levies, liens and utility assessments of the City of Elamath Falls.

"THIS IN STRUMENT WILL NOT ALLOW USE OF THE PROPERTY DESCRIBED IN THIS INSTRUMENT IN VIOLATION OF APPLICABLE LAND USE LAWS AND REGULATIONS. BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON ACQUIRING FEE TITLE TO THE PROPERTY SHOULD CHECK WITH THE APPROPRIATE CITY OR COUNTY PLANNING DEPART N ENT TO VERIFY APPROVED USES."

THIS INSTRUMENT DOES NOT GUARANTEE THAT ANY PARTICULAR USE MAY BE MADE OF THE PROPERTY DESCRIBED IN THIS INSTRUMENT. A BUYER SHOULD CHECK WITH THE APPROPRIATE CITY OR COUNTY PLAN-NING DEPARTMENT TO VERIFY APPROVED USES.

and covenant(s) that grantor is the owner of the above described property free of all encumbrances except THOSE AS SET FORTH HEREINABOVE

and will warrant and defend the same against all persons who may lawfully claim the same, except as shown above.

The true and actual consideration for this transfer is \$____22,000.00 . . •However, the actual consideration consists of or includes other property or value given or promised which is the whole consideration (indicate which)° (Delete between symbols? if not applicable. See ORS 93.030)

In construing this deed and where the context so requires, the singular includes the plural. IN WITNESS WHEREOF, the grantor has executed this instrument this _22_ day of _____April_

19_88.

02

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Clifford & allstott POA

_)ss. Klamath STATE OF OREGON, County of ____ On this 22 Ad day of April , 19 88.

Personally appeared the above named <u>Clifford Allstott</u>

Personally appeared the above hamed		TOLU ALISEO	and acknowledged the foregoing
Instrument to be <u>his</u> voluntary act	and dee Before	me: <u>U</u> Notary Pu	blic for Oregon ission Expires: _//5_90
Clifford Allstott			STATE OF OREGON,
GRANTOR'S NAME AND ADDRESS John A. & Cynthia A. Sabori GRANTEE'S NAME AND ADDRESS Atter recording return to: John A. & Cynthia A. Sabori //2-5 GRANT ST. KLARNATH FOLLS OR YTEO/ NAME, ADDRESS, ZIP		SPACE RESERVED FOR RECORDER'S USE	County of <u>Klamath</u> I certify that the within instrument was received for record on the <u>29thday</u> of <u>April</u> , 19_88_, at3:12
Until a change is requested all tax statements shall be sent to the following add <u>THE ABOVE NAMED GRANTEES</u>			- Evelyn Bichn, County Click
NAME, ADDRESS, ZIP		F	By Burnet Ha Applich Deputy ee \$10.00 FORM 685-2.5M