	87637 STATE FILE NUMBER		IFICATE OF DE	ATH	Vol. m88	Page <b>820</b> 5			
DECEDENT PERSONAL DATA	1A. NAME OF DECEDENT—FIRS  Carl  3. SEX	Allan S. SPANISH/A	STATE OF CALIFORNIA  1B. MIDDLE  11C: LAST  Allan  Peppers  5. SPANISH/HISPANIC   6. DATE OF HURTH			DISTRICT AND CERTIFICATE NUMBER ATH (MONTH, DAY, YEAR) I 2B, HO  8, 1988   144  UNDER I YEAR IF UNDER 24 HOURS MINUTE NO BIRTHFLACE OF MOTHER			
	11A CITIZEN OF MILITARY GWI USA 19 69 15. PRIMARY OCCUPATION Electronic Tech.	2. SOCIAL SECURITY NUMBER 544-58-9675 17. EMPLOYER OF SELF-EMPLOYE	GA  13. MARITAL STATU  Never Marr  D. SO STATES	Mildred Ballard C					
USUAL RESIDENCE	19A. USUAL RESIDENCE—STREET AD 3627 Lemon Avenue 19D. County	Air Power OR LOCATION)   198.	20. NAME AT	Aircraft Communication  19C. City on Town  Long Beach  ND ADDRESS OF INFORMANT—RELATIONSHIP					
PLACE LO OF LO DEATH	Los Angeles 21A. PLACE OF DEATH Long Beach Memoria 21G. STREET ADDRESS (STREET AN 2801 Atlantic Avei	NUMBER OR LOCATION)	CA I 21B. COUNTY HOSpital Los Angeles UMBER OR LOCATION 21D. CITY OR TOWN		Harley Peppers Father 1729 Logan St. 11anath Falls Or. 97603				
C. CAUSE OF LO DEATH	22. DEATH WAS CAUSED BY: IMMEDIATE CAUSE  CONDITIONS, IF ANY, WHICH GAVE RISE TO THE IMMEDIATE CAUSE.  STATING THE UNDER- LYING CAUSE LAST.  (C)		Long Beach AUSE PER LINE FOR A. B. ANI  Lines  Alice		APPROX MATE INTERVA BETTWEE ONSET AND DEATH	24. WAS DEATH REPORTED TO CORONER?			
PHYSI-	23. OTHER SIGNEICANT CONDITIONS—CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE SCIENT 27. WE OVERATION PERFORMED FOR ANY CONDITION IN ITEMS 22 OR DATE  28A. I CERTIFY THAT DEATH OCCURRED AT THE LABOR PROBLEM AND DATE AND PLACE STATED FROM THE CAUSES  STATED.  IATTENDED DECEDENT SINCE   I LAST SAW DECEDENT ALIVE   200 TYPE PHYSICIAN'S NAME AND ADDRESS								
INJURY INFORMA- TION CORONER'S USE	29. SPECIFY ACCIDENT, SUICIDE, STC.  33. LOCATION (STREET AND NUMBER OF		V 34. DESCRIBE HOW	VINJURY OCCURRI	ED (EVENTS WHICH RES				
36. DISPOSITION 37. DATE—MONTH, DAY, YEAR 38 CYCH Jan 28, 1988 40A. NAME OF FUNERAL DIRECTOR (OR PERSON ACTING AS SUC		38. NAME AND ADDRESS OF C Forest Lawn G 1712 Glendal UCH 40B. LICENSE NO.	NAME AND ADDRESS OF CEMETERY OF CREMATORY OF CST Lawn Glendale Crematory 7.12 Clematory			39. EMBALMER'S LICENSE NUMBER AND SIGNATURE NO Embalming 42. DATE ACCEPTED BY LOCAL REGISTRAR			
STATE A	wn Sunnyside Mty.LB	F1151	Kiji da,	\~ <i>p</i>	SO JA	H 2 7 1986			
s-1111-85 )			DEPARTMENT O	JE CERTINED C IM THE CITY OF F PUBLIC HEAD TAMP IN PURP JAN 2 7 19	ie ink.	1-0325			
	ot <u> </u>	larley Peppers	o'clock P ]	M., and duly rese_8205	·	<u>:h</u> day M88			

QUITCLAIM DEED

GEORGE A. GALLOWAY

KNOW ALL MEN BY THESE PRESENTS, That .... , hereinafter called grantor, for the consideration hereinafter stated, does hereby remise, release and quitclaim unto MARGARET A. GALLOWAY

hereinafter called grantee, and unto grantee's heirs, successors and assigns all of the grantor's right, title and interest in that certain real property with the tenements, hereditaments and appurtenances thereunto belonging or in anywise appertaining, situated in the County of KLAMATH State of Oregon, described as follows, to-wit:

A parcel of land situated in the N½N½SW½SW½ Section 8, Twp 39 S., R. 8 EMW more

Beginning at the Northwest corner of said parcel from which the intersection of the North line of the NNSSWZSWZ Section 8 with the Easterly right-of-way line of Round Lake Road Bears Westerly 375.00 feet along the North line of the NLNLSWLSWL Section 8; thence Easterly 360.00 feet along the North line of the N½N½SW½SW½ Section 8 to a point; thence Southerly and approximately parallel to the West section line of Section 8 to a point at the intersection with the South line of the N½N½SW¼SW¼ Section 8; thence Westerly 360.00 feet along the said South line to a point; thence Northerly and parallel to the West

Section line of Section 8 to the point of beginning. Togetherwith a non-exclusive easement for ingress and egress over and across a 30 foot strip lying South of and running parallel to the North line of the NaNaSW4SW4 Section 8 from the Northwest corner of the above described parcel to the intersection with the

Easterly line of Round Lake Road.

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·		INSUFFICIENT	医环腺环肠环 电电流通道	PERCHIPTION	ON	REVERSE 3	ションヒリ
9.19			CONTINUE	DESCRIPTION	· · · ·		Section .
	COVCE	INSUFFICIENT	CONTINUE	Tag 7 (4) 1 (4) (4) (4)			

To Have and to Hold the same unto the said grantee and grantee's heirs, successors and assigns forever.

The true and actual consideration paid for this transfer, stated in terms of dollars, is \$.....NONE...... OHowever, the actual consideration consists of or includes other property or value given or promised which is the whole consideration (indicate which). (The sentence between the symbols 0, if not applicable, should be deleted. See ORS 93.030.) In construing this deed and where the context so requires, the singular includes the plural and all grammatical

if a corporate grantor, it has caused its name to be signed and segl affixed by its officers, fully authorized thereto by

order of its board of directors.

THIS INSTRUMENT 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 THIS INSTRUMENT, THE PERSON ACQUIRING FEE TITLE TO THE PROPERTY SHOULD CHECK WITH THE APPROPRIATE CITY OR COUNTY PLANNING DEPARTMENT TO VERIFY APPROVED USES. GEORGE A STATE OF OREGON, County of

STATE OF OREGON, County of ......Klamath ...May...25,..... ..., 19.88...

Personally appeared the above named George-Galloway.

20 \_\_\_\_\_\_\_and ecknowledged the toregoing instru-....voluntary act and deed.

A

FUBL Potacy Public for Oregon

Personally appeared ... who, being duly sworn, each for himself and not one for the other, did say that the tormer is the president and that the latter is the secretary of ....

and that the seal affixed to the foregoing instrument is the corporate seal of said corporation and that said instrument was signed and sealed in behalf 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:

County of Klamath

Notary Public for Oregon My commission expires:

George A. Galloway

Box 5610 HCR 82 Middletown, CA 95461 GRANTOR'S NAME AND ADDRESS

Margaret A. Galloway Box 5610 HCR 82

Middletown, CA 95461 GRANTEE'S NAME AND ADDRESS

Margaret A. Galloway

Box 5610 HCR 82 Middletown, CA 95461 NAME, ADDRESS, ZIF

a change is requested all tax statements st Margaret A. Galloway

Box 5610 HCR 82 Middletown, CA 95461 SPACE RESERVED FOR

ment was received for record on the RECORDER'S USE

STATE OF OREGON,

at.,3:09......o'clock.p.,M., and recorded in book/reel/volume No...M88.....on page.....8205A...or as document/fee/file/ instrument/microfilm No. 87642 ,, Record of Deeds of said county.

I certify that the within instru-

Witness my hand and seal of County affixed.

EvelynBiehn, County Clerk .... By Servetha Afeloch Deputy

Fee=\$10:00