		COPYRIGHT 1880 STEVENS-NESS LAW PUB. CO. PORTLAND, OR. \$7204
Ē	FORM No. 723-BARGAIN AND SALE DEED [Individual or Corporate]. OK 96450 BARGAIN	AND SALE DEED VO! PODA 1506
	TOTAL WEN BY THESE PRESENTS, T	Hilliam M. Brown and Hale A. Brown
a na na na na tan Anton wan na mangan ka sa sa	for the consideration hereinafter stated, does hereby gra and Hale A. Brown, husband and wife hereinafter called grantee, and unto grantee's heirs, su tenements, hereditaments and appurtenances thereunt of Klamath , State of Oregon, described	nt, bargain, sell and convey unto William M. Brown e, as tenants by the entirety, to one*, accessors and assigns all of that certain real property with the to belonging or in anywise appertaining, situated in the County d as follows, to-wit:
	*half and Bettie L. Boomer, not as of survivorship	tenants in common but with the right
	Lots 10 and 11 in Block 2 RAINBOW	PARK ON THE WILLIAMSON, Klamath
	County, Oregon.	
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25		and the second
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NAL 28'	τ.	
28%		CONTINUE DESCRIPTION ON REVERSE SIDE: f grantee and grantee's heirs, successors and assigns forever. this transfer, stated in terms of dollars, is $\$ -0-$; love and
i i	 MAX WAY ME In construing this deed and where the context In construing this deed and where the context changes shall be implied to make the provisions here In Witness Whereof, the grantor has executed if a corporate grantor, it has caused its name to be sorder of its board of directors. THIS INSTRUMENT WILL NOT ALLOW USE OF THE PROPERTY SCRIBED IN THIS INSTRUMENT IN VIOLATION OF APPLICABLE USE LAWS AND REGULATIONS. BEFORE SIGNING OR ACCEPTINE INSTRUMENT. THE PERSON ACQUIRING FEE TILE TO PROPERTY SHOULD CHECK WITH THE APPROPRIATE CITY COUNTY PLANNING DEPARTMENT TO VERIFY APPROVED USES 	signed and scheatfixed by its offeed that authorized thereto by A DE- LAND WILLIAM M. Brown THE THE THE THE THE THE THE THE
	COUNTY PLANNING DL, Article (If the signer of the above is a corporation, [OKS 194 use the form of ocknowledgment opposite.])	(5/0) SS.
	STATE OF OREGON,	The foregoing instrument was acknowledged
	County of Josephine) The toregoing instrument was acknowledged before The toregoing instrument was acknowledged before	president, and by
	The foregoing instrument was using 19 89, by me this 10 day of January , 19 89, by Will Ham M., Brown and Haxbax XXX	secretary of
a Tanan Selar Tan	BOXWOOX	a corporation, on behalt of the corporation
ļ	Notary Public for Oregon (SEAL) My commission expires: 2-15 59	Notary Public for Oregon (SEAL My commission expires: (If executed by a corporatio affix corporate see
	william M. Brown and Hale A. Brown	own STATE OF OREGON,
		County of
	GRANTOR'S NAME AND AUDRESS William M. Brown and Hale A. Br	mont was received for record on t
	William M. Brown and hale and Bettie L. Boomer	o'clock M., and record
	GRANTEE'S NAME AND ADDRESS	in book / real wolume No
	After recording return to: Christopher D. Mecca, Attorney	FOR FOR RECORDER'S USE RECORDER'S USE Record of Deeds of said county.
	Post Office Box 15/6	Witness my hand and sear
	Grants Pass, OR 97526	County affixed.
	Until a change is requested all tax statements shall be sent to the following	address.
	William M. and Hale A. Brown an Bettie L. Boomer	, Dep
	1666 Gaffney Way, Grants Pass,	OR By

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артанар диланот та аки станикор. Попанар диланот таката на аки станикор. 96450 Bredain and sale e id 1507 Involte . A select the second of the state of the second Anter Constituting States (1997) - Constit na 1999 - Angeler Carlos, Bernello, 1999 - Angeler Angeler, 1999 - Angeler Angeler, 1997 - Angeler Angeler, 1997 1997 - Angeler Carlos, 1997 - Angeler Angeler, 1997 - Angeler Angeler, 1997 - Angeler Angeler, 1997 - Angeler A gendigen of energy FORM No. 159-ACKNOWLEDGMENT BY ATTORNEY-IN-FACT. STATE OF OREGON. SS. County of Josephine On this the 10th day of January , 1989 personally appeared William M. Brown who, being duly sworn (or affirmed), did say that ... he is the attorney in fact for Hale A. Brownand that ... he executed the foregoing instrument by authority of and in behalf of said principal; and ... he acknowledged said instrument to be the act and deed of said principal. . : Before me: -(Official Seal) The second second 4 00 (Signature) Notary Jublic for Oregon ·... ÷ My Commission Expires: 12/15/89 ا به المراجع من الحالي المراجع من المراجع من المراجع والمراجع المراجع والمراجع والمراجع والمراجع والمراجع والم الحالية المراجع المراجع المراجع المراجع المراجع والمراجع والمراجع والمراجع والمراجع والمراجع والمراجع والمراجع والمراجع المراجع المراجع والمراجع والمراجع والمراجع والمراجع والمراجع والمراجع والمراجع والمراجع والمراجع والم STATE OF OREGON: COUNTY OF KLAMATH: SS. Christopher D. Mecca 15+1

Filed for record a	t request of	Onrigotopher			2701	_ uay
ofJan.	A.D., 19 <u>89</u>	_ at	_ o'clockP.M.,	and duly recorded i	in VolM89	,
	of	Deeds	on Page	1506		
			Evelyn Biehn	County Cle		
FEE \$13.00			By <u>Qa</u>	uline Mu	elendore	

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<u> </u>	36 Local File Number		Middle	CATE OF DEATH			File Number DATE OF DEAT January	TH (Month, Day, Year) 20, 1989
· •	NAME James		Cecil	COOK	BIRTHPLACE (City and	State or Foreign 7	, DATE OF BIRT	H (Month, Day, Year)
- 15	SOCIAL SECURITY NUMBER	R 5a. AGE - Last Birthday (Years) 71	Mos. Days	Hours Mina.	Salem, O	regon	April	25, 1917
8.4	HAS DECEDENT EVER IN			OTHER:	les Home 🕅 Decel	dent's Home 🖸	Other (Specify)	OUNTY OF DEATH
	ACTI ITY NAME (If not ins	OSPITAL: Inpatient	d number)	9c. CITY, TO	WN, OR LOCATION O	alls	94. 0	Klamath
2	2934 Summers	Lane - S	pace # 5	SINESSANDUSTRY	Nuver Marrie	TATUS - Married, ed. Widowed,	12. SPOUSE (If M	larried, Widowed)
104	a. DECEDENT'S USUAL OCO (Give kind of work done d jile. Do <u>rol</u> use retired.)	during most of working	100. KIND OF DO		Divorcea (st	cried	Anni	ie Loretta
	Free Faller	13b. COUNTY	13c. CITY, TO	Lumber	134 STREET A	ND NUMBER		
	Oregon	Klamath	Kla	math Falls	2934	summers	LANC -	Space # 5 EDUCATION grade completed)
	e. INSIDE CITY 131. ZIP	CODE 14. WAS (Special Maximum	DECEDENT OF HI city No or Yes - If y ican, Puerto Rican,	SPANIC ORIGIN?	5. RACE American Ind Black, White, etc. (S	Elements	ary/Secondary (0-1	grade completed) 12) College (1-4 or 5+)
L ₂	IYes XINO	97603 500	city:		White	19. INFORMANT	- NAME and relat	tionship to deceased
	7. FATHER NAME first James Elijal	middle iast			2.2.5		Annie C	cok - Wife
···· >2	04. METHOD OF DISPOSITI	ION L Mausoleum	200. PLACE OF other place	Deth - R Disposition (Name of cem "Eternal Hil	ls	LUCATION -	ung on rown, SI.	
SPOSITION	Burlal Cremation	Removal from State	_	Managerial Ca	rdens	Klam	ath Fal	ls, Oregon
<u>-</u> 2	21a. SIGNATURE OF FUNER PERSON ACTING AS S	RAL SERVICE LICENSE	EOR	21b. LICENSE NUMBER (Of Licensee)	22. NAME, ADDRESS	d s Kla 5 Main	math Fu Street	uneral Home
	hann -	101	rad!	3409	Kla	math Fa	lls, Ör	e. / 97601
	23 DATE FILED (Month, Da	a a 1009			24. REGISTRAR'S SIG	Benne	dy	
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l	25. BID ROSPITAL REPAR							
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·	27. TIME OF DEATH	28. WAS MEDICAL	EXAMINER NOTIFI	ED?	IA. TIME OF DEATH	1		м
	1345 M	A X Yes No	d at the time, date,	place and	2. On the basis of exa at the time, data, a	mination and/or is viace and due to	westigation, in my the cause(s) and	y opinion death occurred manuer stated.
ERTIFIER	29. To the best of my kno due to the cauca(b) an (Signature)	owiedge, death occurre	Inmo		(Signature)			
,	30. TATE SIGNED (Month,	un	2		3. DATE SIGNED (Mon	ith, Day, Year)		COUNTY
2	1	20-8	-	MINER (Type or Print)	<u></u>)r. / 97601
3	34. NAME, TITLE, ADDRE	pidleman.	. MD / 4	660 Ultriami	Road / Kl	amath F	alls, C	1. / J/OUL
4	35. NAME OF ATTENDING	O PHYSICIAN IF OTHE	H INAN CENTIFIC					
CONDITIONS IF ANY WHICH GIVE	36. IMMEDIATE CAUSE (E	NTER ONLY ONE CAUS	E PER LINE FOR (), (b), AND (c).) Do not enter m	ode of dying, e.g. Card	lec or Respiratory	Arrest.	and death
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CAUSE STATING THE UNDERLYING CAUSE LAST			$\sum_{i=1}^{n} e_{i} = e_{i}$					Interval between onset and death
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CAUSE OF	PART OTHER SIGNIFICA	ANT CONDITIONS - buting to death but not	related to cause g	iven in PART I.	to the depth?			
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