## KNOW ALL MEN BY THESE PRESENTS, That

THE BANK OF CALIFORNIA, N.A. AS TRUSTEE

hereinafter called the grantor, for the consideration hereinafter stated to the grantor paid by ROBIN.G. RUNNE AND REBECCA E. RUNNE, husband and wife \* , husband and wife, hereinafter called the grantees, does hereby grant, bargain, sell and convey unto the grantees, as tenants by the entirety, the heirs of the survivor and their assigns, that certain real property, with the tenements, hereditaments and appurtenances thereunto belonging or appertaining, situated in the County of KLAMATH , State of Oregon, described as follows, to-wit:

3\_, Lot(s) in Mt. Scott Meadows Subdivision, Tract No. 1027, in the County of Klamath, State of Oregon, as per map recorded in the office of the County Recorder of said County, excepting oil, gas and other mineral and hydrocarbon substances beneath the surface Said conveyance shall be made subject to all conditions, covena nts, restrictions, reservations, easements, rights and rights of way of record or appearing in the recorded map of said tract and specifically the covenants, conditions and restrictions set forth in that certain Declaration of Restrictions recorded in the Official Records of Klamath County, all of which are incorporated herein by reference with the same effect as though said Declaration were fully set forth herein.

\* as tenants by the entirety

10 100

(IF SPACE INSUFFICIENT, CONTINUE DESCRIPTION ON REVERSE SIDE)

To Have and to Hold the above described and granted premises unto the said grantees, as tenants by the entirety, their heirs and assigns forever.

And grantor hereby covenants to and with grantees and the heirs of the survivor and their assigns, that grantor is lawfully seized in fee simple of the above granted premises, free from all encumbrances

grantor will warrant and forever defend the said premises and every part and parcel thereof against the lawful claims and demands of all persons whomsoever, except those claiming under the above described encumbrances.

The true and actual consideration paid for this transfer, stated in terms of dollars, is \$ 11,000.00 

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 seal affixed by its officers, duly 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 THE PROPERTY SHOULD CHECK WITH THE APPROPRIATE CITY OR COUNTY PLANNING DEPARTMENT TO VERIFY APPROVED USES.

STATE OF OREGON.

Personally appeared the above named. .....and acknowledged the toregoing instru-.....voluntary act and deed.

(OFFICIAL SEAL)

Notary Public for Oregon My commision expires

THE BANK OF CALIFORNIA, N.A. CATRUSTEE & Trust Officer Robin C. Russell

Asst. Vice President

ROBIN & RUSSELL each for himself and not one for the other, did say that the former is the ASST UCCE president and that the latter is the

president and that the latter is the president and that the latter is the ASST WOE PLESIDENT secretary of THE BANK OF CALIFORNIA. Wa corporation, 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.

STATE OF OREGON,

Maulie

Notary Public for Orogon WASHINGTON (If executed by a office con

My commission expires:

THE BANK OF CALIFORNIA, N.A., AS TRUSTEE C/O WYNWOOD AGENCY, INC.

P. O. BOX 2236, TACOMA, WA 98401
GRANTOR'S NAME AND ADDRESS

Robin and Rebecca Runne 4678 Lakeview Avenue N.W. Bremerton, WA 98312 03 - 25

GRANTEE'S NAME AND ADDRESS After recording return to

Robin and Rebecca Runne 4678 Lakeview Ave. N.W. Bremerton, WA 98312 NAME, ADDRESS, ZIP

Until a change is requested all tax statements shall be sent to the following address

Robin and Rebecca Runne 4678 Lakeview Ave. N.W. Bremerton, WA 98312 ACE RESERVED

County of Klamath I certify that the within instru-

ment was received for record on the 18th day of April , 19.91. at 11:55 .... o'clock ... A.M., and recorded in book/reel/volume No.....M91...... on page ....7114..... or as fee/file/instrument/microfilm/reception No....28345 Record of Deeds of said county.

Witness my hand and seal of County affixed.

Evelyn Biehn, County Clerk

By Auline Thullende 12 Deputy

Fee \$28.00

0	Carrie Ardea 000				000Pl	PER F			March 2, 1991	
	543-50-2878 B. WAS DECEDENT EVER	(Years) 71	Mos Days	ar 5c. 0	Inder 1 Day Mins	6. BIRTHPLACE ( County) Lane, O	klahoma	o Foreign 7 DATE	OF BIRTH (Month, Day, Year) Ly 3, 1919	
DECEDENT	U.S. ARMED FORCES?	HOSPITAL: D Impatient	ER/Outputien	KOD DOA	OTHER: D	OF DEATH (Check tursing Home 🔲 D	only one) ecedent's Hom	e 🛘 Other (Specif	0	
1	9c. Cl				9c. CITY,	own, or local	ON OF DEATH		94 COUNTY OF DEATH	
2	10a DECEDENT'S USUAL OCCUPATION (Give hird of work done during most of working life, Do not use relied)				ISTRY	Neva	ITAL STATUS -	Alamed, 12. SPC	Klamath  Womed (Womed)	
3	Housewife	Homemaking			Married		Lo	Loyd T.		
4	13a RESIDENCE - STATE Oregon		13c CITY, TOWN, OR LOCATION Klamath Falls			13d STREET AND NUMBER 590 Lakeport		Blvd-		
5	13e RISIOE CITY 13t LIMITS 7	DECEDENT OF HISPANIC ORIGIN? Ily No or Yes - Il yes, specify Cuban, on, Puerto Rican, etc. Mul. No.   Yes			15 RACE American Indian, Black, White, etc. (Specify)			16. DECEDENT'S EDUCATION (Specify only highest grade completed)		
	IT FATHER - NAME Rest	97601 Simoir				White		0	tary (0-121 College (1-4 or 5	
PARENTS	John -	Halsell	IS MOTHER-NA		made	maklen 			er, husband	
DISPOSITION	20a METHOD OF DISPOSITION   Mouroleum   20th PLACE OF DISPOSITION (Name of conflict place)   Cernation   Removal from State   Cernation   Cernation									
7	Obnation Other (Sp. 21s SIGNATURE OF FUNE	RAL SERVICE LICENSEPTS		. HLLLS		al Garder	ns Kla	math Fall	s, OR 97603 enport's Chape	
8	PERSON ACTING AS	suciji d	)X(:	101 Lkors 53⊶0	ce)	of the (	Good Sh	epherd, 6	420 So. 6th St.	
9 REGISTRAR	23 DATE FILED (Marsh, MAR 5 1991				Fileson 1 July 1	Klamath Falls, Oregon 97603-7194				
	25. DID HOSPITAL REPRESENTATIVE MAKE REQUEST FOR ANATOMICAL GIFT CONSENT?				it?	26. WAS GIFT MADE?				
	□YES □NO ŽĪNA					DYES DINO 211/A				
10	TO BE COMPLETED BY CERTIFYING PHYSICIAN					TO BE COMPLETED OILY BY MEDICAL EXAMINER				
11	27. TIME OF DEATH 28. WAS MEDICAL EXAMINER NOTIFIED?  1357 P M				31	. TIME OF DEATH			EAD (Month, Day, Year, Hour)	
CERTIFIER	29 To the best of my know due to the cause(s) an	viedge, death occurred at the	time, date, place a	and	32	On the basis of e	xamination an	id/or Investigation, e to the cause(s) as	in my opinion death occurred	
	(Signatural)	neth Kil	poque		A	(Signature)				
'	30 DATE SIGNED Month, Dry, Year) March 4, 1991					DATE SIGNED (M	onth, Day, You	,	COUNTY	
	34 NAME, TITLE, ADDRESS	s and zip of centifier/Mi lagee, MD, 1900	Moin St	(Type or Print	77	P-17 - 0		~		
CAMMANATA	35. NAME OF ATTENDING	PHYSICIAN IF OTHER THAN C	ERTIFIER (Type or	na)	Liamath	rarrs, o	regon	77601	<u> </u>	
CAUSE STAINED THE UNDERLYING CAUSE LAST  CAUSE OF	36. IMMEDIATE CAUSE (EN	TER ONLY <u>ONE</u> CAUSE <u>PER L</u>	INE FOR (a), (b), A	VID (c) ( Do r	not criter made	of dying, e.g. Card	lac or Respirate	ory Anest	Interval between enset	
	DUE TO, OF AS A CONSCIUENCE OF:					44466			mineter	
	(b) Conterior clientic Heart Disson								and death	
	(c)	ANSEUGENCE OF							Interyor between coset and death	
111153	OTHER SIGNIFICANT	ng to death but not related to ca	Sec. 45		3	7. Did tobacco us to the death?	contribute	38. AUTOPSY	39. If YES were findings consider in determining cause of death	
15	Diabete			r II		J Yes 🗆 No 🗆 P			□Yes □Nb□NA	
16	40 MANNER OF DEATH  10 Natural 11 Po	inding (Month, Day,	UURY 415 TIME O	F 41c.II	NJURY 4	1d. DESCRIBE HO	W INJURY OC	CURRED		
<b>(B)</b>	U Sukcide Um	restigation odelermined to the PLACE OF I	HUURY - Al home, I	1	Yes 25 No	# 1001H0116				
		cryention building, etc.	(Specify)	ent, sireet, fac	acry, crice 14	II. LOCATION (SIR	eci and Number	r or Rural Houle Nun	ber. City or Town, State)	
(	RESERVED FOR REGISTRA	R'S USE				Y 1, 1 1 1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2				
**************************************	THIS IS A TRUE A	AND EXACT REPRODI THE OFFICE OF THE	UCTION OF TH	E DOCUM	ENT OFFIC	CIALLY				
<b>X</b>			NEAWATT CO	ONI I REC	GIOTHAH,	Λ.	$\sim$	//		
110						Don	ia (1	. Verlu	u is	
77.	DATE ISSUED <u>APR 1 7 1991</u>					DONNA A VERLING COUNTY REGISTRAR KLAMATH COUNTY, OREGON				
							変質 在 さいこと	Particle State of	6.80	
No.	ya Thya 🏅	SAN ANY ALTO	ATION OR ER	ASURE VO	IDS THIS	ERTIFICATE				
OF ORE	GON, County	of Klamath)	ss.			MATERIAL PROPERTY AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON ADDRESS OF THE PERSO	THE PROPERTY.			
I certi	fy that the	within inst	rument v	was re	eceive	for re	ecord o	on the 1	8th day of	
oril	, 1991 at	:08 o.c1	.ock P	.М., а	and rec	corded i Oregon.	n Vol	ume M 9Î	at Page 71	
e Recor	a or	Deeds	V   ~~~~							

AF Mi 32 Kl