32139



Vol. mg/ Fage 14090

BESSIE I. GREEN	
convey(s) to MITCHELL OREN HUDGENS, CH	, hereinafter called granton HARLOTTE ANN HUDGENS and MICHELE ORRAN Dommon, but with ällthat real property situated in the
County of Klamath , State of Ore	egon, described as:
Lot 9, Block 2, MOYINA MANOR, in t	the County of Klamath, State of Oregon.
CODE 143 MAP 3909-1AB TL 8900	
**the right of survivorship.	
"THIS INSTRUMENT WILL NOT ALLOW USE OF THE PROPERTY DESCRIBED IN THI SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON ACQUIRING FEE TITLE TO MENT TO VERIFY APPROVED USES."	IS INSTRUMENT IN VIOLATION OF APPLICABLE LAND USE LAWS AND REGULATIONS BEFOR THE PROPERTY SHOULD CHECK WITH THE APPROPRIATE CITY OR COUNTY PLANNING DEPAR
	ANY PARTICULAR USE MAY BE MADE OF THE PROPERTY D CHECK WITH THE APPROPRIATE CITY OR COUNTY PLAN
Covenants, conditions, restriction and easements of record, if any, a	above described property free of all encumbrances excep is, reservations, rights, rights of way and those apparent on the land. ons who may lawfully claim the same, except as shown above
sideration consists of or includes other property or (indicate which)° (Delete between symbols°, if not a In construing this deed and where the con IN WITNESS WHEREOF, the grantor has executed by the contract of the contra	transfer is \$\frac{78,500.00}{0.00}\$. OHowever, the actual convalue given or promised which is the whole consideration applicable. See ORS 93.030) Intext so requires, the singular includes the plural cuted this instrument this \frac{18th}{day} of \frac{July}{0.000}
19 <u>91</u> .	B
	Glove S. Miles
STATE OF OREGON, County of Klamath)ss.
July 18, 19	<u>91</u> .
Personally appeared the above named	Bessie I. Green and acknowledged the foregoing
instrument to be her voluntary act and OFFICIAL SEAL TRACIE V. CHARIOLER BE NOTARY PUBLIC OREGON COMMISSION NO. 000112 MY COMMISSION EXPIRES JULY 05, 1994	Notary Public for Suite My Commission Expires: 1-4-94
Bessie I. Green	STATE OF OREGON,
BANO OR GRANTOR'S NAME AND ADDRESS	County of <u>Klamath</u> I certify that the within instrumen
Mitchell Oren & Charlotte Ann Hudgens Michele Orran Shallbetter	was received for record on the <u>18rh</u> da of
1931 Carlson Dr., KFO 97603 GRANTEE'S NAME AND ADDRESS	at 3:24_ o'clock P_ M., and recorder
After recording return to:	FOR page 14090 or as document/fee/file
540 (1)11+IN K FO	Record of Deeds of said county. Witness my hand and seal of Count
NAME, ADDRESS, ZIP Until a change is requested all tax statements shall be sent to the following address.	affixed.
KEFSL 540 MAIN	<u>Evelyn</u> Biehn, County Clerk NAME
NAME ADDRESS ZIP	By Dauline 1) lucie safare Deput