STATE OF OREGON,

County of Klamath GRANTOR'S NAME AND ADDRE I certify that the within instrument was received for record on the 22nd day of Jan. , 19.92., at .. 3:35 ...... o'clock P.M., and recorded GRANTEE'S NAME AND ADDRESS SPACE RESERVED in book/reel/volume No....M92.....on page.1358.....or as document/fee/file/ RECORDER'S USE ATC instrument/microfilm No. 40102......, Record of Deeds of said county. Witness my hand and seal of NAME, ADDRESS, ZIP County affixed. ents shall be sent to the followin Evelyn Biehn, County Clerk

NAME, ADDRESS, ZIF

By Rules Mulende Deputy Fee \$28.00