#*************************************
PHILLIP O. DEPRATO and MAE L. DEPRATO
P. O. BOX 390-438
ANZA, CA 92539
GRANTUR'S NAME AND ADDRESS
WILLARD H. JONES
2210 GODEN ST. 14103 Ravenwood, Dr.
KLAMATH FALLS, OR 97601
GRANTEE'S NAME AND ADDRESS
WILLARD H. JONES
2210 OGDEN OF. 14103 Ravenwood Ur.
KLAMATH FALLS, OR 97601
NAME, ADDRESS, ZIP
Until a charge is requested all has statements shall be sent to the following address.
TOMBE
14/03 gavenwada 1,101
2216 19 11 11 11 11 11 11

97601

KLAMATH FALLS, OR

MOUNTAIN TITLE COMPANY

Klamath . County of __ I certify that the within instrument wells received for record on the 29th day of ___ Jan at 11:48o'clock A.M., and recorded in book M92 on page 1935 or as file/reel number ___ 40401 Record of Deeds of said county. Witness my hand and seal of County affixed.

Evelyn Biehn, County Clerk Recording Officer Bi Dauline Mule molety Deputy

FOR

RECORDER'S US

MOUNTAIN THEE COMPANY