| FORM No. 690-DEED, WARRANTY (Survivonble) (Individual or Corporate). | COPYRIGHT 1990 STEVENS NEES LAW PUBLISHING CO., PORTLAND, OR 97294 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| ok | That SAMIEL N. MAITERN hereinafter called the grantor, charLES E. CLAUSEN AND NANCY J. CLAUSEN, |
| hereinafter called grantees, hereby grants, berganis, se mon but with the right of survivorship, their assigns ing described real property with the tenements, hered ing described real property of Klamath | s and the heirs of the survivor of said grantees, an or the survivor of said grantees, an or the survivor of said grantees, and or the survivor of said grantees, and the survivor of said gran |
| The Northerly 54.4 feet of Lct 4, Block thereof on file in the office of the Co | |
| | |
| TO HAVE AND TO HOLD the above desc and the heirs of such survivor, forever; provided the | continue Description on REVERSE SIDE) cribed and granted premises unto the said grantees, their assigns that the grantees herein do not take the title in common but with that the grantees herein do not take the grantees. Il vest absolutely in the survivor of the grantees. ants to and with the above named grantees, their heirs and assigns, ants to and with the above named grantees, their heirs and assigns, d premises, that same are free from all encumbrances |
| . that grantor is lawfully select in the | and that |
| and demands of all percent of the solid sector of the sector of the solid sector of th | ALLA OR |
| STATE OF STATES AND STA | b USES. County of 244ma)ss. was acknowledged before me on Marcauber 1719.7.1., Mat The second before me on, 19, t was acknowledged before me on, 19, |
| by | |
| of | My commission expires 4-26-95 |
| | My COMMISSION STATE OF OREGON. |
| SHIRIEL N. MATTERIN | County of <u>Klamath</u> I certify that the within instr |
| Charles E. & Nancy J. Clausen 1781 Arthur 1781 Falls OR 97(03 | Ist. day of |
| Atter recording rolown to: Same as Grantee | Record of Deeds of said county. Witness my hand and seal County affixed. |
| NAME, ADDH 59, 219 Until a change is requested all fax statements shall be sent to the SCIDE AS Grantee | and the second |
| | By DLULTL |
| NAME, ADDF ESS. 71P | |
| CK 30.00 | |
| | |