

63846

06-29-93P03:24 RCVD

Vol 93 Page 15507

STATE OF OREGON,  
County of Klamath ss.

RECORDING REQUESTED BY

AND WHEN RECORDED MAIL THIS DEED AND, UNLESS  
OTHERWISE SHOWN BELOW, MAIL TAX STATEMENTS TO:NAME WILFRED OSHIRO  
STREET ADDRESS 1485 LASSITER DR.  
CITY, STATE Walnut Ca. 91789  
ZIP

Title Order No. \_\_\_\_\_ Escrow No. \_\_\_\_\_

Filed for record at request of:

on this 29th day of June A.D. 19 93  
at 3:24 o'clock P.M. and duly recorded  
in Vol. M93 of Deeds Page 15507.  
Evelyn Biehn County Clerk  
By [Signature] Deputy.

Fee, \$30.00

## GRANT DEED

DOCUMENTARY TRANSFER TAX \$ \_\_\_\_\_

- ☐
- computed on full value of property conveyed, or
- 
- ☐
- computed on full value less liens and
- 
- encumbrances remaining at time of sale.

Signature of Declarant or Agent Determining Tax

Firm Name

FOR VALUABLE CONSIDERATION, receipt of which is acknowledged, I (We), \_\_\_\_\_

MARIE L. MARLOW

grant to WILFRED OSHIRO

all that real property situated in the City of KLAMATH FALLS

(or in an unincorporated area of) KLAMATH

described as follows (insert legal description):

LOT 20, BLOCK 47, KLAMATH FOREST ESTATES FIRST ADDITIONA, KLAMATH COUNTY,  
OREGON.

Assessor's parcel No. \_\_\_\_\_

Executed on 6/16/93, 19\_\_\_\_, at COVINA CA.

STATE OF CALIFORNIA

} ss

MARIE L. MARLOW

## ALL-PURPOSE ACKNOWLEDGMENT

State of CALIFORNIA

County of LOS ANGELES

On 6/16/93 before me, JEFFERY S. ROSS/NOTARY PUBLIC

DATE

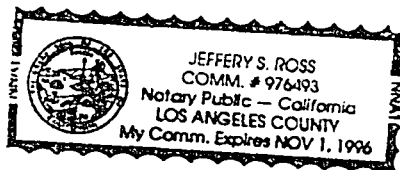
NAME, TITLE OF OFFICER - E.G. "JANE DOE, NOTARY PUBLIC"

personally appeared Marie L. Marlow

NAME(S) OF SIGNER(S)

- ☐
- personally known to me - OR -
- ☒
- proved to me on the basis of satisfactory evidence
- 
- to be the person(s) whose name(s) is/are
- 
- subscribed to the within instrument and ac-
- 
- knowledged to me that he/she/they executed
- 
- the same in his/her/their authorized
- 
- capacity(ies), and that by his/her/their
- 
- signature(s) on the instrument the person(s),
- 
- or the entity upon behalf of which the person(s)
- 
- acted, executed the instrument.

Witness my hand and official seal.

[Signature]  
SIGNATURE OF NOTARY

## CAPACITY CLAIMED BY SIGNER

- ☒
- INDIVIDUAL(S)
- 
- ☐
- CORPORATE
- 
- OFFICER(S) \_\_\_\_\_ TITLE(S) \_\_\_\_\_
- 
- ☐
- PARTNER(S)
- 
- ☐
- ATTORNEY-IN-FACT
- 
- ☐
- TRUSTEE(S)
- 
- ☐
- SUBSCRIBING WITNESS
- 
- ☐
- GUARDIAN CONSERVATOR
- 
- ☐
- OTHER: \_\_\_\_\_

## SIGNER IS REPRESENTING:

NAME OF PERSON(S) OR ENTITY(IES): \_\_\_\_\_

ATTENTION NOTARY: Although the information requested below is OPTIONAL, it could prevent fraudulent attachment of this certificate to unauthorized document.

THIS CERTIFICATE  
MUST BE ATTACHED  
TO THE DOCUMENT  
DESCRIBED AT RIGHT:

Title or Type of Document GRANT DEED

Number of Pages 1 Date of Document 6/16/93

Signer(s) Other Than Named Above \_\_\_\_\_