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TRUST DEED

Vol 93 Page 33530

This Trust Deed, made this 14TH day of DECEMBER 1993 between
MARVIN P. KEENA AND ELLEN M. KEENA as Grantor(s),
PURE PROJECT as Trustee, and KLAMATH COUNTY as beneficiary.

WITNESSETH:

Grantor Irrevocably grants, bargains, sells and conveys to trustee in trust, with power of sale, the property in Klamath County, Oregon,
described as:

Lot 28 of WINEMA GARDENS, according to the official plat thereof on file
in the office of the County Clerk of Klamath County, Oregon.

[Handwritten signature]

Notary Public for Oregon

(JAF)

REQUEST FOR FULL RECONVANCE
To be used only when obligations have been paid in full.

Together with all and singular the tenements, hereditaments and appurtenances and all other rights thereunto belonging or in anywise
now or hereafter appertaining, and the rents, issues and profits thereof and all fixtures now or hereafter attached to or used in
connection with this said real estate.

FOR THE PURPOSE OF SECURING PERFORMANCE of each agreement of grantor herein contained and payment of the sum of
(\$ 3,290.00). This loan shall be interest-free (0%) and shall be due and payable in full upon sale or transfer, for
any reason, of the subject property. The full amount of this note is due until 7-1-94. After 7-1-94 this
note shall be reduced at a rate of 20% of the total each year over the next five (5) years and will be deemed fully satisfied
7-1-99.

To protect the security of this trust deed, grantor agrees:

1. To protect, preserve and maintain said property in good condition and repair; not to remove or demolish any building or
improvement thereon; not to commit or permit any waste of said property.

2. To comply with all laws, ordinances, regulations, covenants, conditions and restrictions affecting said property.

It is mutually agreed that:

3. In the event that any portion or all of said property shall be taken under the right of eminent domain or condemnation, beneficiary
shall have the right, if it so elects, to require that all or any portion of the monies payable as compensation for such taking, which are
in excess of the amount required to pay all reasonable costs, expenses and attorney's fees necessarily paid or incurred by grantor in such
proceedings, shall be paid to beneficiary.

4. Trustee accepts this trust when this deed, duly executed and acknowledged is made a public record as provided by law. Trustee
is not obligated to notify any party hereto of pending sale under any other deed of trust or of any action or proceeding in which grantor,
beneficiary or trustee shall be a party unless such action or proceeding is brought by trustee.

The grantor covenants and agrees to and with the beneficiary and those claiming under him, that he is lawfully seized in fee simple
of said described real property and has a valid, unencumbered title thereto, and that he will warrant and forever defend the same
against all persons whatsoever.

The grantor warrants that the proceeds of the loan represented by the above described note and this trust deed are for improvement
of dwelling heating system on described property.

This deed applies to, insures to the benefit of and binds all parties hereto, their heirs, legatees, devisees, administrators, executors,
personal representatives, successors and assigns. The terms beneficiary shall mean the holder and owner, including pledges, or the
contract secured hereby, whether or not named as a beneficiary herein. In construing this deed and whenever the context so requires,
the masculine gender includes the feminine and the neuter, and the singular number includes the plural.

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TRUST DEED

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IN WITNESS WHEREOF, said grantor has hereunto set his hand the day and year first above written.

MARVIN P. KEENA

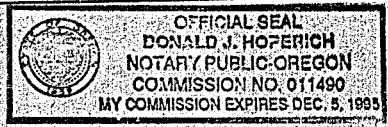
ELLEN M. KEENA

WITNESSES

STATE OF OREGON
County of Klamath

This instrument was acknowledged before me on December 14, 1993

by



[Signature]
Notary Public for Oregon

My commission expires: 12-5-95

REQUEST FOR FULL RECONVEYANCE
To be used only when obligations have been paid or met.

To: Trustee
The undersigned is the legal owner and holder of all indebtedness secured by the foregoing trust deed. All sums secured by said trust deed have been fully paid and/or met and satisfied. You hereby are directed, on payment to you of any sum owing to you under the terms of said trust deed or pursuant to statute, to cancel all evidences of indebtedness secured by said trust deed (which are delivered to you herewith together with said trust deed) and to reconvey, without warranty, to the parties designated by the terms of said trust deed the estate now held by you under the same. Mail reconveyance and documents to

DATED: Dec 14, 1993
FOR THE PURPOSE OF SECURING PERFORMANCE OF THE OBLIGATIONS OF THIS INSTRUMENT, THE FULL AMOUNT OF THIS NOTE IS DUE ON Dec 14, 1993 AND EACH YEAR OVER THE NEXT FIVE (5) YEARS AND WILL BE SECURED BY THE FOLLOWING:

The Trust Deed and the Promissory Note must not be lost or destroyed; to cancel, both must be delivered to trustee before reconveyance shall be made.
Beneficiary
STATE OF OREGON
County of Klamath

MARVIN P. KEENA
ELLEN M. KEENA
1719 McCLELLAN
KLAMATH FALLS, OR 97603
I certify that the within instrument was received for record was received for record on the 16th day of Dec 19, 93 at 11:22 o'clock AM, and recorded in book/reel/Volume, No. M93 on page 33530 or as fee/file/instrument/microfilm/reception

Grantor(s)
Klamath County
Beneficiary
Record of Mortgages of said County
Witness my hand and seal of County affixed.

Evelyn Riehn, County Clerk
Name Paula Mueller Title Deputy
By Paula Mueller Deputy

Fee \$15.00

OREGON DEPARTMENT OF HUMAN RESOURCES
HEALTH DIVISION
CENTER FOR HEALTH STATISTICS
CERTIFICATE OF DEATH

1. DECEASED'S NAME Virginia Wilson Scapple		2. SEX Female		3. DATE OF DEATH (Month, Day, Year) December 6, 1993	
4. DATE OF BIRTH (Month, Day, Year) 10-28-1916		5. AGE 77		6. PLACE OF BIRTH (City and State or Foreign Country) Blisswood, Wisconsin	
7. PLACE OF DEATH (Specify hospital, nursing home, or other institution, if applicable) Merla West Medical Center					
8. CITY, TOWN, OR VILLAGE OF DEATH Klamath Falls		9. COUNTY OF DEATH Klamath			
10. DECEASED'S OCCUPATION Secretary		11. DECEASED'S EDUCATION Elementary School		12. DECEASED'S MARITAL STATUS Married	
13. DECEASED'S ADDRESS 1705 N. Eldorado Avenue		14. DECEASED'S ZIP CODE 97601			
15. DECEASED'S RACE White		16. DECEASED'S ETHNIC ORIGIN 12			
17. DECEASED'S RELIGION Francis		18. DECEASED'S RELIGIOUS BELIEFS Francis - Husband			
19. DECEASED'S PLACE OF INTERMENT Klamath Cremation Service		20. DECEASED'S PLACE OF INTERMENT (City or Town, State) Klamath Falls, Oregon			
21. DECEASED'S SIGNATURE <i>[Signature]</i>		22. DECEASED'S SIGNATURE <i>[Signature]</i>			
23. DATE SIGNED (Month, Day, Year) DEC 10 1993		24. DATE SIGNED (Month, Day, Year) DEC 10 1993			
25. DECEASED'S SIGNATURE <i>[Signature]</i>		26. DECEASED'S SIGNATURE <i>[Signature]</i>			
27. DATE SIGNED (Month, Day, Year) 12/7/93		28. DATE SIGNED (Month, Day, Year) 12/7/93			
29. NAME, TITLE, ADDRESS AND ZIP OF CERTIFYING MEDICAL EXAMINER (Type or Print) F. Geoffrey Marx, M.D., 2614 Clover Drive, Klamath Falls, Oregon 97601		30. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFYING (Type or Print)			
31. IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR ALL PARTS AND DO NOT ENTER IN THIS SECTION IF CAUSE IS A CONSEQUENCE OF ANOTHER CAUSE) Sepsis		32. IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR ALL PARTS AND DO NOT ENTER IN THIS SECTION IF CAUSE IS A CONSEQUENCE OF ANOTHER CAUSE) Pneumonia			
33. IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR ALL PARTS AND DO NOT ENTER IN THIS SECTION IF CAUSE IS A CONSEQUENCE OF ANOTHER CAUSE) Rheumatoid Arthritis		34. IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR ALL PARTS AND DO NOT ENTER IN THIS SECTION IF CAUSE IS A CONSEQUENCE OF ANOTHER CAUSE) Rheumatoid Arthritis			
35. DATE OF DEATH 12/6/93		36. DATE OF DEATH 12/6/93		37. DATE OF DEATH 12/6/93	
38. DATE OF DEATH 12/6/93		39. DATE OF DEATH 12/6/93		40. DATE OF DEATH 12/6/93	
41. DATE OF DEATH 12/6/93		42. DATE OF DEATH 12/6/93		43. DATE OF DEATH 12/6/93	
44. DATE OF DEATH 12/6/93		45. DATE OF DEATH 12/6/93		46. DATE OF DEATH 12/6/93	
47. DATE OF DEATH 12/6/93		48. DATE OF DEATH 12/6/93		49. DATE OF DEATH 12/6/93	
50. DATE OF DEATH 12/6/93		51. DATE OF DEATH 12/6/93		52. DATE OF DEATH 12/6/93	
53. DATE OF DEATH 12/6/93		54. DATE OF DEATH 12/6/93		55. DATE OF DEATH 12/6/93	
56. DATE OF DEATH 12/6/93		57. DATE OF DEATH 12/6/93		58. DATE OF DEATH 12/6/93	
59. DATE OF DEATH 12/6/93		60. DATE OF DEATH 12/6/93		61. DATE OF DEATH 12/6/93	
62. DATE OF DEATH 12/6/93		63. DATE OF DEATH 12/6/93		64. DATE OF DEATH 12/6/93	
65. DATE OF DEATH 12/6/93		66. DATE OF DEATH 12/6/93		67. DATE OF DEATH 12/6/93	
68. DATE OF DEATH 12/6/93		69. DATE OF DEATH 12/6/93		70. DATE OF DEATH 12/6/93	
71. DATE OF DEATH 12/6/93		72. DATE OF DEATH 12/6/93		73. DATE OF DEATH 12/6/93	
74. DATE OF DEATH 12/6/93		75. DATE OF DEATH 12/6/93		76. DATE OF DEATH 12/6/93	
77. DATE OF DEATH 12/6/93		78. DATE OF DEATH 12/6/93		79. DATE OF DEATH 12/6/93	
80. DATE OF DEATH 12/6/93		81. DATE OF DEATH 12/6/93		82. DATE OF DEATH 12/6/93	
83. DATE OF DEATH 12/6/93		84. DATE OF DEATH 12/6/93		85. DATE OF DEATH 12/6/93	
86. DATE OF DEATH 12/6/93		87. DATE OF DEATH 12/6/93		88. DATE OF DEATH 12/6/93	
89. DATE OF DEATH 12/6/93		90. DATE OF DEATH 12/6/93		91. DATE OF DEATH 12/6/93	
92. DATE OF DEATH 12/6/93		93. DATE OF DEATH 12/6/93		94. DATE OF DEATH 12/6/93	
95. DATE OF DEATH 12/6/93		96. DATE OF DEATH 12/6/93		97. DATE OF DEATH 12/6/93	
98. DATE OF DEATH 12/6/93		99. DATE OF DEATH 12/6/93		100. DATE OF DEATH 12/6/93	

ORIGINAL - VITAL STATISTICS COPY

45-2 Pg. 101

THIS IS A TRUE AND EXACT REPRODUCTION OF THE DOCUMENT OFFICIALLY REGISTERED AT THE OFFICE OF THE KLAMATH COUNTY REGISTRAR

DEC 10 1993

DATE ISSUED:

CHARLENE BARCUS
COUNTY REGISTRAR
KLAMATH COUNTY, OREGON

STATE OF OREGON: COUNTY OF KLAMATH: ss.

Filed for record at request of Francis Scapple the 16th day of Dec. A.D. 19 93 at 1:37 o'clock P.M., and duly recorded in Vol. M93 of Deeds on Page 33532

Evelyn Biehn - County Clerk
By Pauline M. Mendenhall

FEE \$10.00

Return: Francis Scapple, 1705 Eldorado
Klamath Falls, Or. 97601