FORM No. 690-DEED, WARRANTY (Survivership) (Individual or Corporate).

76519

02-22-94A10:37 RCVD

Volmay Page 5722 K-46055 WARRANTY DEED ---- SURVIVORSHIP

KNOW ALL MEN BY THESE PRESENTS, That WILMA 5. STROUD

., hereinafter called the grantor, for the consideration hereinefter stated to the grantor paid by WILMA S. STROUD AND DWAYNE E. DOWN

hereinalter called grantees, hereby grants, bargains, sells and conveys unto the grantees, not as tenants in common but with the right of survivorship, their assigns and the heirs of the survivor of the grantees, the following described real property with the tenements, hereditaments and appurtenances thereunto belonging or in any way appertaining, situated in the County ofKLAMATH, State of Oregon, to-wit:

LOT 18 BLOCK 28 OF HOT SPRINGS ADDITION TO THE CITY OF KLAMATH FALLS, OREGON, ACCORDING TO THE DULY RECORDED PLAT THEREOF NOW ON FILE IN THE OFFICE OF THE CLERK OF KLAMATH COUNTY, OREGON.

(IF SPACE INSUFFICIENT, CONTINUE DESCRIPTION ON REVERSE SIDE)

TO HAVE AND TO HOLD the above described and granted premises unto the grantees, their assigns and the heirs of such survivor, forever; provided that the grantees herein do not take the title in common but with the right of survivorship, that is, that the fee shall vest absolutely in the survivor of the grantees.

And the grantor above named hereby covenants to and with the above named grantees, their heirs and assigns, that grantor is lawfully seized in fee simple of the premises, that same are free from all encumbrances

and that

grantor will warrant and forever defend the premises and every part and parcel thereof against the lawful claims and demands of all persons whomsoever, except those claiming under the above described encumbrances.

The true and actual consideration paid for this transfer, stated in terms of dollars, is \$......-0-[®]However, the actual consideration consists of or includes other property or value given or promised which is

the whole part of the consideration (indicate which). (The sentence between the symbols), it not applicable, should be deleted. See ORS 93,030.) In construing this deed, where the context so requires, the singular includes the plural, and all grammatical changes shall be made so that the provisions hereof apply equally to corporations and to individuals.

IN WITNESS WHEREOF, the grantor has executed this instrument this ... 18TH. day of ... FEBRUARY.... 19.94; if a corporate grantor, it has caused its name to be signed and its seal, if any, atlixed by an officer or other person duly authorized to do so by order of its board of directors.

THIS INSTRUMENT WILL NOT ALLOW USE OF THE PROPERTY DE-SCRIBED IN THIS INSTRUMENT IN VIOLATION OF APPLICABLE LAND USE LAWS AND REGULATIONS. BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON ACQUIRING FEE TITLE TO THE PROPERTY SHOULD CHECK WITH THE APPROPRIATE CITY OR COUNTY PLANNING DEPARTMENT TO VERIFY APPROVED USES.

Wilm WILMA S. STROUD

My commission expires2/4/97			
This instrument was acknowledged before me on	STATE OF OREGON, Course	nty of KLAMATH) ss.
This instrument was acknowledged before me on	This instrument was a	cknowledged before n	re on FEBRUARY 18, 1994
by			
as of OFFICIAL SEAL TAMMY C. ALLEN NOTARY PUBLIC - OREGON COMMISSION NO. 021865 MY COMMISSION PARES FEB. 0A. 1997 My commission expires 2/4/97 My commission expires 2/4/97 My commission expires 2/4/97 STATE OF OREGON, County of Klamath	by		
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Granter's Nome and Address SS. Granter's Nome and Address I certify that the within instrument was received for record on the 22nd day of	OFFICIAL SEAL TAMMY C. ALLEN NOTARY PUBLIC - OREGON COMMISSION NO. 021865		() Notary Public for Oregon
Gennter's Nome and Address Granter's Name and Address, Zipi: WILMA S. STROUD Inter Granter's Name and Address, Zipi: WILMA S. STROUD INTER STROUD IN			County of Klamath
Grantes's Name and Address Grantes's Name and Address Miter recording rotum to (Name, Address, Zip): WILMA_S_STROUD 1855_MELROSE KLAMATH_FALLS_OR_97601 WILMA_S_STROUD 1011 requested otherwise send all tax statements to (Name, Address, Zip): WILMA_S_STROUD 1011 requested otherwise send all tax statements to (Name, Address, Zip): WILMA_S_STROUD 1855_MELROSE KLAMATH_FALLS_OP_07601 WILMA_S_STROUD 1855_MELROSE KLAMATH_FALLS_OP_07601 WILMA_S_STROUD 1855_MELROSE NAME NA	"Grantor's Name and Address		was received for record on the 22nd day
Grantee's Name and Address M94. on page After recording rotum to (Name, Address, Zip): BFACE RESERVED FOR RECORDER'S USE book/reel/volume No			
After recording return to (Name, Address, Zip): FOR Record of No. 76519 WILMA. S., STROUD. 1855. MELROSE. KLAMATH. FALLS, OR. 97601. Witness my hand and seel of County affixed. Jaili requested otherwise send all tax statements to (Name, Address, Zip): Witness WILMA. S. STROUD. 1855. MELROSE. KLAMATH. FALLS, OR. 97601. Witness my hand and seel of County affixed. WILMA. S. STROUD. 1855. MELROSE. WILMA. S. MELROSE. NAME WILMA. S. MELROSE. NAME MATH. FALLS, OP. 07601. OP. 07601.	Grantes's Nome and Address	BPACE RESERVED	book/reel/volumeNoM94_ on page
1855 MELROSE Record of Deeds of said County. KLAMATH_FALLS, OR_97601 Witness my hand and seel of County affixed. Jaili requested otherwise send all tax statements to (Name, Address, Zip): Witness WILMA S. STROUD Evelyn Biehn, County Clerk 1855_MELROSE NAME VIAMATH_FALLS_OP_07601 Of Guidland Section	After recording rotum to (Name, Address, Zip):		
1855_MELROSE Record of Deeds of said County. KLAMATH_FALLS, OR_97601 Witness my hand and seal of County affixed. Julif requested otherwise send all tax statements to (Name, Address, Zip): Evelyn Biehn, County Clerk. 1855_MELROSE NAME VILMA SSTROUD. TITLE 1855_MELROSE NAME VILMA TH_FALLS_OP_07601 Official for the statements of the statement of	WILMA S. STROUD		ment/microfilm/reception No. 76519,
Jalif requested otherwise send all tax statements to (Name, Address, Zip): WILMA S. STROUD. 1855. MELROSE. NAME RIAMATH RALLS, OR, 07601	1855 MELROSE		
WILMA S. STROUD Biehn, County Clerk 1855 MELROSE THE FALLS OF OTGOL	KLAMATH FALLS, OR 97601		•
1855 MELROSE	Until requested otherwise send all tax statements to (Name, Address, Zip):		County attixed.
LASS MELROSE NAME TITLE			Evelyn Biehn, County Clerk
KLAMATH FALLS, OR 97601 Fee \$30,00 By Laller Miller Mills Deputy			NAME TITLE
	KLAMATH_FALLS, OR. 97601	Fee_\$30,00	By Stallers 1 Kills Michael Deputy