85507 PORM No. 931-Oregon Trust Bood Series-TEUST URED.		
84624 07-21-94A	1:06 RCVD TRANS	VOLM94 Pagp 24
THIS TRUST DEED, made th	18	Vol. <u>m94 page 2235</u>
and the second sec	The second	DDVAND
ROBERT V. WETHERN, S		BRYANT, as Gran, as Gran, as Trustee, , as Benefici.
Grantor irreventt	WITWESSETH.	as Randiat
LOTS 47	fains, sells and conveys to trustee i , Oregon, described as:	in trust, with power of sale, the property
UNIT, PLAT 2.	9, KLAMATH FALLS FORES	ST ESTATES, HIGHWAY 66
ngen and have a first the second s		
THIS INSTRUMENT IS BEING RE-	RECORDED TO ADD THE TRUSTE	$\mathbf{E}^{(n)} = \left\{ \begin{array}{llllllllllllllllllllllllllllllllllll$
A		
together with all and singular the tenements, he or hereafter appertaining, and the rents, issues the property. FOR THE PURPOSE OF SECURING NINE THOUSAND AND NO/1	and profits thereof and all fixtures now or	ther rights thereunto belonging or in anywise no
AND NO/1	00 ON MANCE of each agreement of f	grantor herein contest
not sooner paid, to be due and payable	of order and made by grantor, the fi	ingle according to the terms of a promise
The date of maturity of the debt secured becomes due and payable. In the event the with sold, conveyed, assigned or alienated by the gran at the beneficiary's option, all obligations secured become immediately due and payable. To project the security of	by this instrument is the date, stated ab in described property, or any part there for without first	inal payment of principal and interest hereof, i rove, on which the final installment of the note of, or any interest therein is sold strend to the
T. and paveblo	Thistiumont, irranaching -1	Consent of approval -4 it
2. To complete or restore promptly and in damaged or destroyed thereon and any and in	waste of the property, good and habitable condition	ot to remove or demolish any building or im-
so requests, to join in executing such tinances, reg to pay for filing same in the proper trubic differences	ulations, covenants, conditions and restric atements pursuant to the United Control	tions affecting the property '' if
lamage by lire and such other bararde maintain	insurance on the building.	searches made by filing officers or searching
liciary as soon as insured; if the grantor shall fail for the least fifteen days prior to the expiration thall fail for	, with loss payable to the latter; all polic or any reason to provide the latter; all polic	in an amount not less than \$
iny indebtedness secured hereby and in such order of r any part thereot, may be released to france of	lected under any fire or other insurance is beneficiary may determine or other	and to deliver the policies to the beneficiary and on the buildings, the beneficiary may pro- policy may be applied but the policy may pro-
5. To keep the property iree from construct seessed upon or against the property into construct	notice.	r waive any default or notice of default here-
thay, at its option	anoci payment or by president	any taxes, assessment
th interest as aforesaid, the property barwaiver of	t any rights arising from based this trust d	eed, shall be added to set forth in the note
le and constitute a breach of this trust deside the	he beneficiary, tender all ments shall be in	mediately due and must that they are
7. To appear in and defend any action or pro- in any suit, action or proceeding in this	his obligation and frustee's and attorney' beeding purporting to affect if	well as the other costs and expenses of the
ti and expenses, including anid	nonciary or trustee may and	rights of powers of hearthy
including agreed that		sonable as the homestic of decree of
8. In the event that any portion or all of the rry shall have the right, if it so elects, to require the Trust Deed Act provides that the trustee hereun company or savings and loan association authorized to to insure title to real property of this state, its subsidie licensed under ORS 696.505 to 696.585.	that all or any portion of the monies p	of eminent domain or condemnation, bene- payable as compensation for such taking
Interrust Deed Act provides that the trustee hereun company or savings and loan association authorized to to insure title to real property of this state, its subsidia licensed under ORS 696.505 to 696.585.	do business under the laws of Oregon or the l ries, affiliates, agents or branches, the Unite	tive member of the Oregon State Bar, a bank, United States, a title insurance company autho- d States or any agency thereof, or an atomic
TRUST DEED	Charles and the second	TE OF OREGON,
ELAINE MELTABARGER & YVONE BRYANT	-	unty of
5800 HAMILTON ST. Apt 179 SACRAMENTO Grada. 95842	ment	Was received the within instru-
RUBERT WETLE	[]	diclock 19
Rural Rt. 2, Box 323 h Bonanza, Oregon Snelder	page	on on
1 15 Wandilelar		
ording Roturn to (Nanio, Addross, Zip):		d of of said C
ording Return to (Nanis, Address, Zip): ROBERT WETHERN WAL Rt - 2 Rev. 2000	Record	
	Record County	d of of said County. Witness my hand and seal of y affixed.

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and that the grantor will warrant and forever detend the same against all persons whomsoever. (a) portugative proceeds of the loan represented by the above described note and this trust deed are: (b) and the grantor warrants that the proceeds of the loan represented by the above described note and this trust deed are: (b) and applies to, invose to the benetic of and birds all parties heredo, their heirs, legates, devises, administrators, executors, personal representatives, successors and assigns. The term beneticiary shall mean the holder and owner, including pledgee, of the contract if the context so requires, the singular shall be taken to mean and include the plural, and that generally all grammatical changes shall be made, assumed and implied to make the provisions hereof apply equally to corporations and to individuals. IN WITNESS WHEREOF. the grantor has executed this instrument the day and year first above written. IN WITNESS WHEREOF, the grantor has executed this instrument the day and year first above written.

*IMPORTANT NOTICE: Delete, by lining out, whichever warranty (a) or (b) is not applicable; if warranty (a) is applicable and the beneficiary is a creditor beneficiary MUST comply with the Act and Regulation by making required disclosures; for this purpose use Stevens-Ness Form No. 1319, or equivalent. If compliance with the Act is not required, disregard this notice. anne Ther YVONE THERESA BRYANT STATE OF OREGON, County of Klamath This instrument was acknowledged before me on DONALD J TORRIE This instrument was acknowledged before me on bv as of. OFFICIAL SEAL DOMALD J. TORRIE NOTARY PUBLIC - OREGON COMMISSION NO. 028843 MY COMMISSION EXPIRES OCT 14, 1997 0 tary Public for Oregon My commission expires 10. 的形态的复数形式 STATE OF OREGON: COUNTY OF KLAMATH: SS. Filed for record at request of વ્યવસાયની અનુવર્ગ Aspen Title co of July SPANIPSSIAR SC at 11:06 the 21st o'clock _____A.M., and duly recorded in Vol. _ dav M94 Colfr. Mortgages on Page 22356 Evelyn-Biehn FEE \$15.00 Biehn County Clerk 5 4 By 8 1452.30-51-THE DE WALT 유민하는 문



STATE OF OREGON: COUNTY OF KLAMATH: 55.

12.

Fi	led for recor	d at reques	t of	Aspen Title Co the 5th da	av.
of		Aug	A.D.,	9 94 at 11:06 o'clock A.M., and duly recorded in Vol. M94	
			of	Mortgages on Page <u>24262</u>	-,
			i i i i i i	Evelyn Biehn ` County Clerk	
F)	EE \$15.	00		By Dauline Mullendere	

	1. DECEDENTS First NAME Marlene	Miqdi	1	Constant La Constantina de Constantina de Constantina de Constantina de Constantina de Constantina de Constanti	2. SEX	3. DATE OF DEATH (M	VID One Yourd
	4 SOCIAL SECURITY NUMBE 545-54-1773	ER Sa AGII - Last Birthday 5b. U	POLETE ndar 1 Year Sc. Under 1 Day	6 BRITHPLACE (City	-Female	March 11, 10 7. DATE OF BIATH (MO)	
DECEDE	8. WAS DECEDENT EVER IN	48 Mos.	Po FLACE	moodland,	CA	December 17	1940
1	PD. FACILITY NAME (IF not in	atitution, give street and number	Outpatient DOA	RING Home R DI	codent's Home	Other (Specify)	
2	- Twin Lakes Rd 10s. DECEDENT'S USUAL OCC (Give Lind of Work done of 110. Do not use refliged.)	Oregon Shore	DS Chilo	ovin			OF DEATH
3	- School Bus Dr	118	nsportation	11. MARITAL Never Ma Diverced	STATUS - Married, rried, Widowed, (Specify)	12. SPOUSE (If Married,	Widowsd)
4		130. T	OOL BUS Driving	Warri	AND NUMBER	Charles Pol	ete
5	- 130. INSIDE CITY 131. 21P (Klamath C	hiloguin	Twin	Lakes Rd	., Oregon Sl	ores
6	Ves 2 No 976	4 Specify:	TOF HISPANIC ORIGIN? fes - (I yes, specify Cuben, Plican, etc.) 20 No Yes:	White	Elementa	B. DECEDENT'S EDUCAT	10N (mpleted)
PARENTS	-Warren H. He	nderson T.	ter · NAME first mid tie cille - Hart	maldan	19. INFORMANT .	NAME and relationship to	
DISPOSITION	20s. METHOD OF DISPOSITION	V LJ Mausoleum 20b. PLA	CE OF DISPOSITION (Nam's of ceme in place)	tery, cremetory, or			
7	Donation D Other (Specia	vi	math Memorial Parl	٢.	Klamath	Falls, Ore.	
8	218. SIGNATURE OF FUNERAL PERSON ACTING AS SUCT	Alla	21b. LICENSE NUMILER 22. (Of Licensee)	NAME ADDRESS	AND ZIP OF FACIL	my	
urgistinat	24. DATIC FILED (Month, Day, Y	m		O'Hair's Fi 15 Pine St	Klameth	pel, Inc. Falls, Ore.	97601
	MA 25. DID HOSPITAL REPRESENT	R 1 5 1985		nerel	Kenne.	les	
		NIA	and mical GIFI CORSENT? 26.	WAS GIFT MADE?		0	
10	TO BE COM	PLETED BY CERTIFYING PHYSI	DIAN		10 M		
	M	WAS MEDICAL EXAMINER NO		MON OF MEALIN 13	10. DATE PROHOU	MEDICAL EXAMINER	Yest, Hour)
GERTIFIER	dus to the cause(s) and man (Signature)	e, death occurred at the time, de ner stated.	te, place and 11 32. Or at	the brais of examin the time, date, place	Warch 11	1989 8:05 atlon, in my opinion death use(s) and manner stated	A. M
12	30. DATE SIGNED (Month, Day, Y	98/1		1 Comes	M Ro	and a sing manner stated	T
13			Mar	ch 13, 198	ay, Year)	COUNTY	<u> </u>
14	JA NAME, TITLE, ADDRESS AND James N. Beggs	A4 12	AMINEH (Type or Print)	41. 73. 74		Klamath	
IF ANY N							
CONDITIONS IF ANY WHICH GIVE RISE TO IMMEDIATE CAUSE	30. IMMEDIATE BAUSE (ENTER ON	LY ONE CAUSE PER LINE FOR IN), (D), AND (C).) Do not enter mode of d	(ing. e.g. Cardiac or I	Respiratory Arrest.	Interval betwe	
STATING THE I	DUE TO, OR AS A CONSEQU	ENCE OF	oronary occlo	sipa		and deeth 2	min
CAUSE OF	DUE TO, OR AS A CONSEQU	ENCE OF:		ers second		Interval betwee And dealn	en onset
DEATH	ART OTHER SIGNIFICANT CONDI	TIONS - ath but not related to cause giv				Interval betwee and death	
		and you that retailed to cause giv		Id ichacco use cont the desth?		PSY 39. If YES more linutage in determining coust	
15	MANNER OF DEATH	41a DATE OF INJURY 41D TH	ME OF 41c. 2NJURY 41d. DE	SCFIBE HOW INJU	AUNK BYES	No X Yes O No C	I NUA
15 16			M I Yes I No				
15 [16] 17]	XXNatural Pending Accident Investigation Subleta Undetermined	410. PLICE OF BUJURY - At hor	te, farm, street, factory, office 411, LOG	CATION (Street and	Number of Rural R	oute Number, City or Tos	n. Statel
	Suicide Undeterminer Manner Homicide Intervention	Den unit, ale. (Specily)	사람이 집에서 것 같아? 合計 合다. 이				
	Con Undatarminer		He, farm, street, factory, office 411, LOC				
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