

After recording return to grantee herein.
Until a change is requested send all tax
statements to grantee herein.

KEY TITLE NO. 33741
ESCROW NO. 27-22068
TAX ACCT. NO. 130726
MAP #

GRANTEE'S NAME AND ADDRESS:

DONNALEA
DONNA-LEE GRAY
60264 TUMALO CIRCLE
BEND, OR 97702

mtc 33741
WARRANTY DEED -- STATUTORY FORM
(INDIVIDUAL or CORPORATION)

ANDERSEN
MYRA ANDERSON, who acquired title as M. K. SCOVILLE Grantor,

conveys and warrants to:

DONNALEA
DONNA-LEE GRAY, Grantee,

the following described real property free of encumbrances except as
specifically set forth herein:

SEE EXHIBIT A WHICH IS MADE A PART HEREOF BY THIS REFERENCE

SUBJECT TO: SEE ATTACHED EXHIBIT A

THIS INSTRUMENT WILL NOT ALLOW USE OF THE PROPERTY DESCRIBED 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 AND TO DETERMINE ANY LIMITS ON LAWSUITS AGAINST FARMING OR FOREST
PRACTICES AS DEFINED IN ORS 30.930.

The true consideration for this conveyance is \$6,500.00. However, if the
actual consideration consists of or includes other property or other value
given or promised, such other property or value was part of the/the whole of
the (indicate which) consideration. If grantor is a corporation, this has been
signed by authority of the Board of Directors.

Dated this 24 day of August, 1994,

GRANTOR(S):

X Myra Anderson
MYRA ANDERSON who acquired title as M. K. SCOVILLE
ANDERSEN

STATE OF OREGON, County of Washington, ss.

This instrument was acknowledged before me on Aug. 24, 1994.
by MYRA ANDERSON ANDERSEN

Kerry L. Charlton
Notary Public for Oregon

My commission expires: 5/6/97



Lot 9, Block 20, Tract No. 1082, THIRD ADDITION TO RIVER PINE ESTATES,
according to the official plat thereof on file in the office of the County
Clerk of Klamath County, Oregon.

SUBJECT TO:

1. a. Taxes or assessments which are not shown as existing liens by the records of any taxing authority that levies taxes or assessments on real property or by the public records
b. Proceedings by a public agency which may result in taxes or assessments, or notices of such proceedings, whether or not shown by the records of such agency or by the public records.
2. a. Easements, liens, encumbrances, interests or claims thereof which are not shown by any public records.
b. Any facts, right, interests or claims which are not shown by the public records but which could be ascertained by an inspection of the land or by making inquiry of persons in possession hereof.
3. Discrepancies, conflicts in boundary lines, shortage in area, encroachments, or any other facts which a correct survey would disclose, and which are not shown by the public records.
4. a. Unpatented mining claims.
b. Reservations or exceptions in patents or in Acts authorizing the issuance thereof.
c. Water rights, claims or title to water:
whether or not the matters excepted under (a), (b), or (c) are shown by public record
5. Any lien or right to a lien, for services, labor or materials heretofore or hereafter furnished, imposed by law and not shown by the public records.
6. Taxes for the fiscal year 1994-1995, a lien not yet due and payable.
Account No: 2309-01300-02400 Key No: 130726
Code No: 112
7. An easement created by instrument, subject to the terms and provisions thereof,
Dated: June 5, 1973
Recorded: June 5, 1973
Volume: M73, page 6939 Microfilm Records of Klamath County, Oregon
In favor of: Midstate Electric Cooperative, Inc.
For: Electric Transmission line
Affects: No exact location given
8. Covenants, conditions, restrictions and easements, but omitting restrictions, if any, based on race, color, religion or national origin, imposed by instrument,
Recorded: June 5, 1973
Volume: M73, page 6940, Microfilm Records of Klamath County, Oregon
9. Reservations and restrictions, subject to the terms and provisions thereof,
"Said plat being subject to building setback lines, irrigation easement, road easement and street reservation strip as shown on the annexed map."
10. Subject to building setback lines as shown on the dedicated plat.
11. Subject to easements for irrigation as shown on the dedicated plat.

27435

TYPE
ON PRINT
IN
BLACK
INK

INSTRUCTIONS
SEE
HANDBOOK

Local File Number
Howard
First
Middle
Last

STATE OF OREGON
DEPARTMENT OF HUMAN RESOURCES
Vital Records Unit
CERTIFICATE OF DEATH

State File Number

DECEDENT

IF DEATH
OCCURRED IN
HOSPITAL
OR
RESIDENCE
RECORD
RESIDENCE
RESIDENCE
RESIDENCE

1. RACE: White
2. CITY, TOWN OR LOCATION OF DEATH: Hillsboro
3. SEX: Male
4. AGE - Last Birthday: 39
5. DATE OF BIRTH (month, day, year): August 6, 1981
6. DATE OF BIRTH (month, day, year): November 3, 1941
7. STATE OF BIRTH (if not in U.S.):
8. COUNTRY OF BIRTH (if not in U.S.):
9. CITIZEN OF WHAT COUNTRY: USA
10. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify):
11. SPOUSE (if MARRIED, WIDOWED, DIVORCED):
12. WAS DECEDENT EVER IN U.S. ARMED FORCES? (Specify Yes or No):
13. RESIDENCE - STATE: Oregon
14. COUNTY: Washington
15. CITY, TOWN, OR LOCATION: Hillsboro
16. STREET AND NUMBER OR R.F.D.: 915 N.E. Arrington
17. INFORMANT - NAME and relationship to decedent: Kathy Steele - wife
18. LOCATION: city or town
19. STATE: Oregon
20. FATHER - NAME: Howard
21. MOTHER - Maiden Name: Alice Mary Deiter
22. SOCIAL SECURITY NUMBER: 266-60-2096
23. USUAL OCCUPATION (Give kind of work done during most of working life, even if retired):
24. DATE OF DEATH (month, day, year): August 6, 1981

DISPOSITION

1. FUNERAL SERVICE LICENSED OR Person Acting As Such: William D. Platt
2. NAME AND ADDRESS OF FACILITY: Donelson, Sewell & Mathews 171 N 3rd Hillsboro, Ore.
3. DATE SIGNED (Month, Day, Year): 8/6/81
4. HOUR OF DEATH: 3:00 P.
5. TIME RECEIVED BY REGISTRAR (Month, Day, Year): 8/6/81
6. DATE RECEIVED BY REGISTRAR (Month, Day, Year): 8/6/81

CERTIFIER

1. NAME AND ADDRESS OF CERTIFIER (Type or Print): William D. Platt MD
2. DATE SIGNED (Month, Day, Year): 8/6/81
3. HOUR OF DEATH: 3:00 P.
4. TIME RECEIVED BY REGISTRAR (Month, Day, Year): 8/6/81
5. DATE RECEIVED BY REGISTRAR (Month, Day, Year): 8/6/81

CAUSE OF DEATH

1. IMMEDIATE CAUSE: (Type or Print)
2. INTERMEDIATE CAUSE: (Type or Print)
3. UNDERLYING CAUSE: (Type or Print)
4. OTHER SIGNIFICANT CONDITIONS: (Type or Print)
5. DATE OF INJURY (Month, Day, Year):
6. HOUR OF INJURY:
7. PLACE OF INJURY: (Type or Print)
8. DESCRIBE HOW INJURY OCCURRED:
9. LOCATION:
10. STREET OR R.F.D. NO.:
11. CITY OR TOWN:
12. STATE:

STATE OF OREGON: COUNTY OF CLATSOP: ss.
Filed for record at request of Mountain Time Co
of Sept. A.D. 19 94 at 10:41 o'clock AM., and duly recorded in Vol. M94
Deeds on Page 27433
FEE \$40.00
Evelyn Biehn - County Clerk
By [Signature]