## 92023 |**KIL**

## KLAMATH COUNTY TITLE COMPAN

Volm94 Page 36959

K-47208

## STATI TORY WARRANTY DEED

(Individual or Corporation)

2. 2. 全元之化。75700 Bi 是"图表"	LAWRENCE	G. WALDMAN	and SUSA	N J. WALDMAN	<u> </u>		
conveys and warrants to	CLINT ON F	RANCIS ADA	(S				, Grai
the following described real	property in t	he County of	Klamat	h		and State of Orego	, Grai
Tot 750 Plant 117		· · · · · · · · · · · · · · · · · · ·					
Lot 759, Block 117, official plat there Oregon.	MILLE AD	OITION to t	he City of	of Klamath F the County C	alls, acco lerk of K	ording to the Lamath County	! '•
					\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		
			1725 - 915	TERMS RECEIP	50. St.		
			. 경우 기자		į.		
			Del elisi	Marie History			
	A Company						
This property is free of liens a	and encumbra	nces EXCEPT		And the second s			
Subject to Reservati	ons and m	aptriotion		rd, rights o	of way, an	d escoments .	. e
ecord and those app and/or drainage.	arent upo	n the land	contrac	ts and/or li	ens for i	rrigation	DΙ
he true consideration for this	S CORVEYANCE I	cs 34,000.	00	\$ 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		quirements of ORS	
ATED this 25th day of solution of its board of direct	November ors.	r 1994	164	corporate grantor	; it has cause	d its name to be	signed l
AWRENCE G. WALDMAN			— <del>S</del> U	SAN J. WALDY	1.Wal	Elmen	
	<del></del>	-					
	<u> </u>	1	17 d 145, s				
see attached	notice	al rooks					
ATE OF OREGON, County of	of		les CTATE	CONFORM	TE ACKNOW	LEDGEMENT	
The foregoing instrument day of	was acknowled	eddad before	me Ti	ie iotegoing ins	trument was	acknowledged be	fora m
		y	this by	da	y of	19	
Grand Control of the	<u>-1</u>		by				and
			of	ration, on behalf			
dispersion for the			1 2017	nadon, on benam	or the corpor	ation.	
ry Public for Oregon ommission expires:			Notary P	ublic for Oregon	<del></del>		<del></del>
and white	; ;			ussion expires:			
recording return to:			THIS	SPACE RESERV	ED FOR REC	CORDER'S USE	
INTON FRANCIS ADAMS O Martin							
nta Clara, CA 9505	0						
NAME, ADDRESS, ZIP	444						
change is requested all tax statements shall be a INTON FRANCIS ADAMS	ent to the fall owing a fe	bress:					
) Martin Ita Clara, CA 95050	1						
, ,,,,,,		7.4	51164				

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State of Calitoenia		OPTIONAL SECTION
County of Santa Clapa On 11/30/174 before me, TE	RRY /12/ EGL NO TORY PLABIC  NAME TITLE OF CHISCER E.C. JANEIX E NOTAFF PUBLIC	CAPACITY CLAIMED BY SIGNE Though statute does not require the Notary fill in the data below, doing so may provinvaluable to persons relying on the document  NOTIFICATION TO THE PROPERTY OF T
personally appeared Lassence	2 6. Unil Susan J. Waldman	CORPORATE OFFICER(S)
OFFICIAL NOTARY SEAL TERRY MC ITEAL Lotsy Public - Cationia SANTA CLARA COUNTY My Comm. Expires Aug 18,1995	oved to me on the basis of satisfactory evidence to be the person(s) who se name(s) learn subscribed to the within nstrument and acknowledged to me that he shouthed executed the same in fis/her/heir authorized capacity(les), and that by hie/her/their signature(s) on the instrument the person(s), or the enrity upon behalf of which the person(s) acted, executed the instrument.  WITNESS my hand and of ficial seal.	GENERAL  ATTORNEY-IN-FACT  TRUSTEE(S)  GUARDIAN/CONSERVATOR  OTHER:
	THE PROPERTY OF THE PARTY OF TH	·
HIS CERTIFICATE MUST BE ATTACHED TO HE DOCUMENT DESCRIBED AT RIGHT:	TITLE OR TYPE OF DOCUMENT Statutor	y whereanty beed
HE DOCUMENT DESCRIBED AT RIGHT:	NUMBER OF PAGES DATE OF DOCU	LY WARRANTY Deed
HE DOCUMENT DESCRIBED AT RIGHT:  bough the data requisited here is not required by law,  could prevent travel lent rectifications to the country of the coun	NUMBER OF PAGES DATE OF DOCU	ey Warranty Derd MENT_11/25/94
HE DOCUMENT DESCRIBED AT RIGHT:  Dough the data requissted here is not required by law, could prevent frauct, lent reattachment of this form.	NUMBER OF PAGES DATE OF DOCUMENT SIGNER(S) OTHER THAN NAME DABOVE NOTATIONAL NOTARY A SOCIATION 8226 Remit	ey Warranty Derd MENT_11/25/94
TATE OF OREGON: COUNTY OF KLA	NUMBER OF PAGES DATE OF DOCUMENT STATUTOR NUMBER OF PAGES DATE OF DOCUMENT SIGNER(S) OTHER THAN NAME DABOVE DATE OF DOCUMENT SIGNER(S) OTHER THAN NAME DABOVE DATE OF DOCUMENT OF THE SIGNER	MENT

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