TITLE & ESCROW, INC.

WARRANTY DEED (INDIVIDUAL)

convey(s) to ROBERT B. TODD and	SUSAKI NI TADD	, hereinafter called grantor,
wite)		(husband and
County of Klamath, State of C	regon, described as:	t real property situated in the
20+ 24 Block 6 Mou	intain Lakes Ho	mesites in
the county of Klamati		egou
Code 8 Map 3606-1	700723700	
"THIS INSTRUMENT WILL NOT ALLOW USE OF THE PROPERTY DESCRIBED IN THE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON ACQUIRING FEE TITLE THE MENT TO VERIFY APPROVED USES."	HIS INSTRUMENT IN VIOLATION OF APPLICABLE TO THE PROPERTY SHOULD CHECK WITH THE APP	LAND USE LAWS AND REGULATIONS, BEFORE ROPRIATE CITY OR COUNTY PLANNING DEPART:
THIS INSTRUMENT DOES NOT GUARANTEE THAT DESCRIBED IN THIS INSTRUMENT. A BUYER SHOULD NING DEPARTMENT TO VERIFY APPROVED USES	ANY PARTICULAR USE MAY E	
and covenant(s) that grantor is the owner of the	above described property free	of all encumbrances except
and will warrant and defend the same against all pers	ons who may lawfully claim the	
· · · · · · · · · · · · · · · · · · ·		
The true and actual consideration for this sideration consists of or includes other property or (indicate which) (Delete between symbols; if not a lin construing this deed and where the con	value given or promised which	is the whole consideration
In construing this deed and where the condition in WITNESS WHEREOF, the grantor has exe	cuted this instrument this	Eday of <u>December</u> ,
	Samuel	D Kamsey
		7
STATE OF OPERAL A		
STATE OF OREGON, County of KLAMATH)ss.	144
DECEMBER 15, 19	The state of the s	
Personally appeared the above named		SEY
nstrument to be FREE voluntary act and	I deed.	acknowledged the foregoing
OFFICIAL SEAL	()111/.	/
NOTARY PUBLIC, OREGON #	fore me: John Problem	, ·
COMMISSION NO. 004238 MY COMMISSION AND JAN 24, 1995	Nótary Públic for My Commission Expi	02EGON res: 1/25/94
Samuel W. Ramsey	STATE OF	DREGON
Klamath Falls, Or 97601 GRANTOR'S NAME AND ADDRESS		ss.
ROBERT B. and SUSAN N. TODO	- I certi	y that the within instrument of for record on the 15th day
Klamath Falls, OV. 97601 GRANTEE'S NAME AND ADDRESS	of at <u>3:45</u>	Dec, 19 94 , o'clock PM., and recorded
ter recording return to:	SPACE RESERVED in book/ree	/volume No. <u>M94</u> on 41 or as document/fee/file/
508 Sievra Ct	RECORDER'S USE Instrument/	microfilm No. 92476
NAME, ADDRESS, ZIP		s my hand and seal of County
til a change is requested all tax statements shall be sent to the following address.		n
Jame as	NAME	Biehn, County Clerk
NAME, ADDRESS, ZIP	ByWALL	me Mulerday Deputy