RECORDING REQUESTED BY	03-27-95P03:54 RCVD	MAS Page 7197
WHEN RECORDED MAIL THIS DEED AND, UNLESS RWISE SHOWN BELOW, MAIL TAX STATEMENT TO:		
CHERYL ANTARES 4601 SUMMER HILL ROAD ss SALIDA, CA 95368		
STATE &		
	SPACE ABOVE THIS LINE FOR RECO	RDER'S USE
GRANT DEED	DOCUMENTARY TRANSFER TAX \$ Computed on full value of property computed on full value less liens a encumbrances remaining at time of	conveyed, or and
	Signature of Declarant or Agent Determining T	ax Firm Name
FOR VALUABLE CONSIDERATION, receipt of JEFFERY L. RYAN, A SING	(NAME	OF GRANTOR(S))
grant toCHERYL L. ANTARES, A M	ARRIED WOMAN	
all that real property situated in the City of	(NAME OF GRANTEE(S)) KLAMATH FALLS (O	r in an unincorporated area of)
KLAMATH	County,OREGONdescribed as fo	llows (insert legal description):
IN THE COUNTY OF KLAMATH PROPERTY ADDRESS: 3302 & Klamat	3304 Boardman h Falls, OR 97603	INT ACRES,
Assessor's parcel No. CODE 41 MAP 309 Executed on Mark 21ST	95 at Phoenix	Arrzona
STATE OF Augona COUNTY OF Maure		AND START RA
On 2/JJ MA, before me, Jud	1.1 BROWAL	RIGHT THUMBPRINT (Optione!)
personally appeared <u>IEFFCRU</u> personally known to me (or proved to me or the person(s) whose name(s) is/are su acknowledged to me that he/she/they exec	bcribed to the within instrument and cuted the same in his/her/their authorized capacity(ies), and that by his/her/their	TOP OF THUMB HERE
UDY BROWN	signature(s) on the instrument the person(s), for the entity upon behalf of which the person(s) acted, executed the instrument. WITNESS my hand and official seal.	CAPACITY CLAIMED BY SIGNER(S)  INDIVIDUAL(S) CORPORATE OFFICER(S) (TITLES) PARTNER(S) LIMITED GENERAL
MAIL TAX (Seal)	601 Summer Hill Rd. Saldia, CA 95368	ATTORNEY IN FACT       TRUSTEE(S)       GUARDIAN/CONSERVATOR       OTHER
STATEMENTS TO: <u>Cheryl Antares,4</u>	and the second	Sig. ER IS REPRESENTING:
Before you use this form, fill in all blanks, and make wh particular transaction. Consult a lawyer if you doubt t inakes no representation or warranty, express or implie form for an intended use or purpose.	hatever changes are appropriate and necassary to your he form's fitness for your purpose and usu. Wolcotts d, with respect to the merchantability or fitness of this network with respect to the merchantability of the set	AND ST PERSONS OF ENTIDUES:
Before you use this form, fill in all blanks, and make wh particular transaction. Consult a lawyer if you doubt t inakes no representation or warranty, express or implie form for an intended use or purpose. TATE OF OREGON: COUNTY OF KLAMATH	1181139198981 111 (811111) 111 8111	
Before you use this form, fill in all blanks, and make wh particular transaction. Consult a lawyer if you doubt t inakes no representation or warfanty, express or implie form for an intended use or purpose. TATE OF OREGON: COUNTY OF KLAMATH led for record at request of	: SS. Cheryl Antares	

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