Grantor's Na	Grantor's Name and Address		

Grantee's Name and Address			
After recording return to (Name, Add			
Samuel A Ras	nicet		
514 LOglant av	e		
KlamathFalls	7 OB		
Until requested otherwise send all tax	statements to (Name, Address, Zip):		
Joanna pelso	Ω		
1720 W. Begue	rlake DivesiE		
ISSoquah w	1.98027		
0			
N. N. Hanger			

Witness my hand and seal of County affixed.

State of California	ss.			
County of Fresno	\$ 33.		·	
On June 9, 1995 Notary Public, personally appeared personally known to me (or proved name(s) is/are subscribed to the wit same in his/her/their authorized cap person(s), or the entity upon behalf	to me on the basis of sat thin instrument and acknowledge to pacity(jes), and that by his	isfactory evider owledged to me	that he/she/they	
WITNESS my hand and official sea	_	(Seal)	Comm.	S. Heinen Z #964060 LIC CALIFORNIA CLES COUNTY Wess June 12 1996
FD-1 (12/90)				
STATE OF OREGON: COUNTY OF KLAMA	ATH: ss.			
Filed for record at request of	at3:54o'clock	on Page 15930.	ly recorded in Vol	
FEE \$35.00	Ву	Berneth	a G. Letsch, County	Clerk

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