

3693

08-01-95P01:48 RCVD

RECORDING REQUESTED BY

Vol. 195 Page 20065

AND WHEN RECORDED MAIL THIS DEED AND, UNLESS OTHERWISE SHOWN BELOW, MAIL TAX STATEMENT TO:

NAME Louis Antonio
STREET 530 Gaylard Drive
ADDRESSCITY, STATE & Burbank, CA
ZIP CODE 91505-4714

TITLE ORDER NO. _____ ESCROW NO. _____

SPACE ABOVE THIS LINE FOR RECORDER'S USE

GRANT DEED

DOCUMENTARY TRANSFER TAX \$

- ☐ computed on full value of property conveyed, or
☐ computed on full value less liens and encumbrances remaining at time of sale.

Signature of Declarant or Agent Determining Tax _____ Firm Name _____

FOR VALUABLE CONSIDERATION, receipt of which is acknowledged, I (We), Louis Antonio

(NAME OF GRANTOR(S))

grant to Lou Antonio, Trustee of the Lou Antonio Trust Dated July 19, 1995

(NAME OF GRANTEE(S))

all that real property situated in the City of Klamath Falls (or in an unincorporated area of)Klamath

(NAME OF COUNTY)

County, Oregon

(STATE)

described as follows (insert legal description):

Lot 16, Block 1, Tract 1053 as per map
 recorded in the office of the County Recorder
 of Klamath County, State of Oregon. OREGON SHORES ADDITION.

Assessor's parcel No. _____

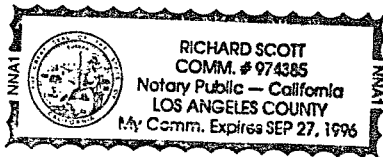
Executed on _____, _____, at _____

(CITY AND STATE)

STATE OF CaliforniaCOUNTY OF Los AngelesOn July 26, 1995 before me, Richard Scott, Notary Public

(NAME/TITLE, I.e. "JANE DOE, NOTARY PUBLIC")

personally appeared Louis Antonio
 personally known to me (or proved to me on the basis of satisfactory evidence) to be
 the person(s) whose name(s) is/are subscribed to the within instrument and
 acknowledged to me that he/she/they executed the same in his/her/their authorized
 capacity(ies), and that by his/her/their signature(s) on the instrument the person(s),
 or the entity upon behalf of which the person(s) acted, executed the instrument.



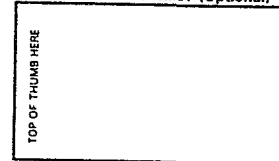
WITNESS my hand and official seal.

(SIGNATURE OF NOTARY)

MAIL TAX
STATEMENTS TO: _____

(Seal)

RIGHT THUMBPRINT (Optional)



CAPACITY CLAIMED BY SIGNER(S)

- ☐ INDIVIDUAL(S)
☐ CORPORATE OFFICER(S) _____ (TITLE)
☐ PARTNER(S) ☐ LIMITED ☐ GENERAL
☐ ATTORNEY IN FACT
☐ TRUSTEE(S)
☐ GUARDIAN/CONSERVATOR
☐ OTHER _____

SIGNER IS REPRESENTING:
(NAME OF PERSON(S) OR ENTITY(ES))

STATE OF OREGON: COUNTY OF KLAMATH: ss.

Filed for record at request of _____ the _____ 1st day
 of _____ Aug _____ A.D., 19 95 at 1:48 o'clock P M., and duly recorded in Vol. M95,
 of _____ Deeds _____ on Page 20065.

FEE \$30.00

Berneisha G. Lotson, County Clerk

By [Signature]