



WARRANTY DEED

ASPEN TITLE #05044017

AFTER RECORDING RETURN TO:
JAMES R. & BARBARA L. CRENSHAW
P.O. BOX 538
OAKRIDGE, OREGON 97463

UNTIL A CHANGE IS REQUESTED ALL TAX
STATEMENTS TO THE FOLLOWING ADDRESS:
SAME AS ABOVE

MELVIN J. PERRICONE AND BARBARA D. ERLER, hereinafter called
GRANTOR(S), convey(s) to JAMES R. CRENSHAW AND BARBARA L.
CRENSHAW, HUSBAND AND WIFE hereinafter called GRANTEE(S), all
that real property situated in the County of KLAMATH, State of
Oregon, described as:

Lot 4, Block 7, MT. SCOTT MEADOWS SUBDIVISION, TRACT NO. 1027,
in the County of Klamath, State of Oregon.

CODE 8 MAP 3107-1A0 TAX LOT 11100

"THIS INSTRUMENT WILL NOT ALLOW USE OF THE PROPERTY DESCRIBED IN
THIS INSTRUMENT IN VIOLATION OF APPLICABLE LAND USE LAWS AND
REGULATIONS. BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE
PERSON ACQUIRING FEE TITLE TO THE PROPERTY SHOULD CHECK WITH THE
APPROPRIATE CITY OR COUNTY PLANNING DEPARTMENT TO VERIFY
APPROVED USES AND TO DETERMINE ANY LIMITS ON LAWSUITS AGAINST
FARMING OR FOREST PRACTICES AS DEFINED IN ORS 30.390."

and covenant(s) that grantor is the owner of the above described
property free of all encumbrances except covenants, conditions,
restrictions, reservations, rights, rights of way and easements
of record, if any, and apparent upon the land, contracts and/or
liens for irrigation and/or drainage,

and will warrant and defend the same against all persons who may
lawfully claim the same, except as shown above.

The true and actual consideration for this transfer is
\$6,000.00.

In construing this deed and where the context so requires, the
singular includes the plural.

IN WITNESS WHEREOF, the grantor has executed this instrument
this 17TH day of NOVEMBER 1995.

X Melvin J. Perricone
MELVIN J. PERRICONE

X Barbara D. Erler
BARBARA D. ERLER

STATE OF NEW YORK
County of King

On 11/22, 1995, MELVIN J. PERRICONE AND BARBARA D. ERLER
personally appeared before me,

X who is personally known to me
_____ whose identity I proved on the basis of _____
_____ whose identity I proved on the oath/affirmation of _____

to be the signer of the above document, and he/she acknowledged
that he/she signed it.

Mary Paone
Notary Public for NEW YORK
My Commission Expires: 2/28/96

MARY PAONE
Notary Public, State of New York
No. 43-4641318
Qualified in Richmond County
Commission Exp. 2/28/96

