

20600

Volume Page 19328

After recording return to:

DAVID W. COOPER

P.O. BOX 200

CRESCENT, OR 97733

TITLE ORDER NO. K-49283

RE: ESCROW NO: 27-24694

Until a change is requested tax statements
shall be sent to the following address:
SAME AS ABOVE

TAX ACCT. NO: 132831 132840 875173
MAP NO:

WARRANTY DEED -- STATUTORY FORM
(INDIVIDUAL or CORPORATION)

JAMES D. MELTON, an individual Grantor,

conveys and warrants to:

DAVID W. COOPER and SHANNON K. COOPER, husband and wife, Grantee,

the following described real property free of encumbrances except as
specifically set forth herein:

Lots 2 and 5 in Block 15 First Addition to River Pine Estates, according
to the official plat thereof on file in the office of the County Clerk of
Klamath County, Oregon.

SUBJECT TO:

1. Right of way, recorded January 2nd 1952, in Volume 258 page 425, Deed
records of Klamath County, Oregon
2. Building and Use Restrictions for First Addition to River Pine Estates
recorded May 5th 1967, in Volume M67 page 3386, Deed records of
Klamath County, Oregon
3. Right of Way Easement, recorded May 22nd 1967, in Volume M67 page
3803, Deed records of Klamath County, Oregon.

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 THE 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 30.930.

The true consideration for this conveyance is \$49,000.00. However, if the
actual consideration consists of or includes other property or other value
given or promised, such other property or value was part of the/the whole of
the (indicate which) consideration.

If grantor is a corporation, this has been signed by authority of the Board of
Directors.

Dated this 24th day of June, 1996.

GRANTOR(S):

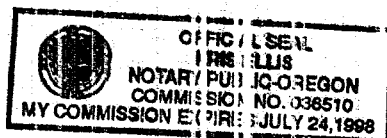
JAMES D. MELTON

STATE OF OREGON, County of Deschutes) ss.

This instrument was acknowledged before me on June 24th, 1996,
by JAMES D. MELTON

Kristi Ellis
Notary Public for Oregon

My commission expires: 7/24/96



G-9362

FD-302 (Rev. 10-6-95)

Local File Number

276

REGON DEPARTMENT OF HUMAN RESOURCES
HEALTH DIVISION
CENTER FOR HEALTH STATISTICS
CERTIFICATE OF DEATH 136

19329

State File Number

DECEDENT

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1. DECEDENT'S NAME Mary Belle MELTON		2. SEX Female		3. DATE OF DEATH (Month, Day, Year) May 3, 1995	
4. SOCIAL SECURITY NUMBER 566-42-7812		5. AGE (Years) 61		6. DATE OF BIRTH (Month, Day, Year) May 29, 1933	
7. WAS DECEDENT EVER IN U.S. ARMED FORCES? No		8. PLACE OF BIRTH (City and State or Foreign) Neenah, WI		9. PLACE OF DEATH (Check only one) ☐ Home ☐ Nursing Home ☐ Hospice ☐ Other (Specify) _____	
10. FACILITY NAME (If not in home, give name and number) St. Charles Medical Center		11. CITY, TOWN, OR LOCATION OF DEATH Bend		12. COUNTY OF DEATH Deschutes	
13. DECEDENT'S USUAL OCCUPATION (Give kind of work done during a 12-month period) Cook		14. MARITAL STATUS (Married, Never Married, Widowed, Divorced, Separated) Married		15. SPOUSE (If Married, Widowed, Divorced, Separated) James D.	
16. RESIDENCE - STATE Oregon		17. CITY, TOWN, OR LOCATION Clatskanie		18. STREET AND NUMBER Lot 2 Blk 15 Riverpine Estates	
19. WAS DECEDENT OF U.S. BIRTH? No		20. SPECIFIC COUNTRY OF BIRTH (Specify) Sweden		21. RACE (Specify) White	
22. EDUCATION (Specify only highest grade completed) 8		23. NAME AND RELATIONSHIP TO DECEDENT James D. Melton - husband		24. LOCATION (City or Town, State) Bend, Oregon	
25. METHOD OF DISPOSITION ☐ Burial ☐ Cremation ☐ Other (Specify) _____		26. PLACE OF DISPOSITION (Name of cemetery, crematory, or other place) Central Oregon Cremation Assoc.		27. DATE OF DISPOSITION (Month, Day, Year) May 5, 1995	
28. SIGNATURE OF FUNERAL SERVICE PERSON ACTING AS SUCH <i>[Signature]</i>		29. LICENSE NUMBER (If Licensed) 3565		30. NAME, ADDRESS AND ZIP OF FACILITY Niswonger-Reynolds, Inc. 105 N.W. Irving Bend, OR 97701	
31. DATE OF DEATH (Month, Day, Year) May 3, 1995		32. SIGNATURE OF REGISTRAR <i>[Signature]</i>		33. DATE OF DEATH (Month, Day, Year) May 3, 1995	
34. TO BE COMPLETED BY MEDICAL EXAMINER 34a. TIME OF DEATH 7:30 P.M.		34b. DATE OF DEATH (Month, Day, Year) May 3, 1995		34c. TIME OF DEATH (Month, Day, Year) 7:30 P.M.	
35. TO BE COMPLETED BY MEDICAL EXAMINER 35a. TIME OF DEATH (Month, Day, Year) May 3, 1995		35b. DATE OF DEATH (Month, Day, Year) May 3, 1995		35c. TIME OF DEATH (Month, Day, Year) 7:30 P.M.	
36. NAME, TITLE, ADDRESS AND ZIP OF OFFICE Stephen A. Mann, D.O., 726 N.W. Hall Street, Bend, Oregon 97701		37. NAME OF ATTENDING PHYSICIAN (If not a physician, give name and title) Stephen A. Mann, D.O.		38. NAME OF ATTENDING PHYSICIAN (If not a physician, give name and title) Stephen A. Mann, D.O.	
39. IMMEDIATE CAUSE (ENTER ONE) Acute myocardial infarction		40. CAUSE PER LINE (FOR EACH LINE) (Do not enter mode of dying, e.g., Carcinoma or Respiratory Arrest) Myocardial infarction		41. INTERVAL BETWEEN ONSET AND DEATH Minutes	
42. OTHER SIGNIFICANT CONDITIONS Diabetes, Obesity, Hypertension		43. MANNER OF DEATH Natural		44. DESCRIBE HOW BURY OCCURRED Interment	
45. DATE OF DEATH (Month, Day, Year) May 3, 1995		46. TIME OF DEATH (Month, Day, Year) 7:30 P.M.		47. DATE OF DEATH (Month, Day, Year) May 3, 1995	
48. TIME OF DEATH (Month, Day, Year) 7:30 P.M.		49. DATE OF DEATH (Month, Day, Year) May 3, 1995		50. TIME OF DEATH (Month, Day, Year) 7:30 P.M.	
51. DATE OF DEATH (Month, Day, Year) May 3, 1995		52. TIME OF DEATH (Month, Day, Year) 7:30 P.M.		53. DATE OF DEATH (Month, Day, Year) May 3, 1995	
54. TIME OF DEATH (Month, Day, Year) 7:30 P.M.		55. DATE OF DEATH (Month, Day, Year) May 3, 1995		56. TIME OF DEATH (Month, Day, Year) 7:30 P.M.	
57. DATE OF DEATH (Month, Day, Year) May 3, 1995		58. TIME OF DEATH (Month, Day, Year) 7:30 P.M.		59. DATE OF DEATH (Month, Day, Year) May 3, 1995	
60. TIME OF DEATH (Month, Day, Year) 7:30 P.M.		61. DATE OF DEATH (Month, Day, Year) May 3, 1995		62. TIME OF DEATH (Month, Day, Year) 7:30 P.M.	
63. DATE OF DEATH (Month, Day, Year) May 3, 1995		64. TIME OF DEATH (Month, Day, Year) 7:30 P.M.		65. DATE OF DEATH (Month, Day, Year) May 3, 1995	
66. TIME OF DEATH (Month, Day, Year) 7:30 P.M.		67. DATE OF DEATH (Month, Day, Year) May 3, 1995		68. TIME OF DEATH (Month, Day, Year) 7:30 P.M.	
69. DATE OF DEATH (Month, Day, Year) May 3, 1995		70. TIME OF DEATH (Month, Day, Year) 7:30 P.M.		71. DATE OF DEATH (Month, Day, Year) May 3, 1995	
72. TIME OF DEATH (Month, Day, Year) 7:30 P.M.		73. DATE OF DEATH (Month, Day, Year) May 3, 1995		74. TIME OF DEATH (Month, Day, Year) 7:30 P.M.	
75. DATE OF DEATH (Month, Day, Year) May 3, 1995		76. TIME OF DEATH (Month, Day, Year) 7:30 P.M.		77. DATE OF DEATH (Month, Day, Year) May 3, 1995	
78. TIME OF DEATH (Month, Day, Year) 7:30 P.M.		79. DATE OF DEATH (Month, Day, Year) May 3, 1995		80. TIME OF DEATH (Month, Day, Year) 7:30 P.M.	
81. DATE OF DEATH (Month, Day, Year) May 3, 1995		82. TIME OF DEATH (Month, Day, Year) 7:30 P.M.		83. DATE OF DEATH (Month, Day, Year) May 3, 1995	
84. TIME OF DEATH (Month, Day, Year) 7:30 P.M.		85. DATE OF DEATH (Month, Day, Year) May 3, 1995		86. TIME OF DEATH (Month, Day, Year) 7:30 P.M.	
87. DATE OF DEATH (Month, Day, Year) May 3, 1995		88. TIME OF DEATH (Month, Day, Year) 7:30 P.M.		89. DATE OF DEATH (Month, Day, Year) May 3, 1995	
90. TIME OF DEATH (Month, Day, Year) 7:30 P.M.		91. DATE OF DEATH (Month, Day, Year) May 3, 1995		92. TIME OF DEATH (Month, Day, Year) 7:30 P.M.	
93. DATE OF DEATH (Month, Day, Year) May 3, 1995		94. TIME OF DEATH (Month, Day, Year) 7:30 P.M.		95. DATE OF DEATH (Month, Day, Year) May 3, 1995	
96. TIME OF DEATH (Month, Day, Year) 7:30 P.M.		97. DATE OF DEATH (Month, Day, Year) May 3, 1995		98. TIME OF DEATH (Month, Day, Year) 7:30 P.M.	
99. DATE OF DEATH (Month, Day, Year) May 3, 1995		100. TIME OF DEATH (Month, Day, Year) 7:30 P.M.		101. DATE OF DEATH (Month, Day, Year) May 3, 1995	
102. TIME OF DEATH (Month, Day, Year) 7:30 P.M.		103. DATE OF DEATH (Month, Day, Year) May 3, 1995		104. TIME OF DEATH (Month, Day, Year) 7:30 P.M.	
105. DATE OF DEATH (Month, Day, Year) May 3, 1995		106. TIME OF DEATH (Month, Day, Year) 7:30 P.M.		107. DATE OF DEATH (Month, Day, Year) May 3, 1995	
108. TIME OF DEATH (Month, Day, Year) 7:30 P.M.		109. DATE OF DEATH (Month, Day, Year) May 3, 1995		110. TIME OF DEATH (Month, Day, Year) 7:30 P.M.	
111. DATE OF DEATH (Month, Day, Year) May 3, 1995		112. TIME OF DEATH (Month, Day, Year) 7:30 P.M.		113. DATE OF DEATH (Month, Day, Year) May 3, 1995	
114. TIME OF DEATH (Month, Day, Year) 7:30 P.M.		115. DATE OF DEATH (Month, Day, Year) May 3, 1995		116. TIME OF DEATH (Month, Day, Year) 7:30 P.M.	
117. DATE OF DEATH (Month, Day, Year) May 3, 1995		118. TIME OF DEATH (Month, Day, Year) 7:30 P.M.		119. DATE OF DEATH (Month, Day, Year) May 3, 1995	
120. TIME OF DEATH (Month, Day, Year) 7:30 P.M.		121. DATE OF DEATH (Month, Day, Year) May 3, 1995		122. TIME OF DEATH (Month, Day, Year) 7:30 P.M.	
123. DATE OF DEATH (Month, Day, Year) May 3, 1995		124. TIME OF DEATH (Month, Day, Year) 7:30 P.M.		125. DATE OF DEATH (Month, Day, Year) May 3, 1995	
126. TIME OF DEATH (Month, Day, Year) 7:30 P.M.		127. DATE OF DEATH (Month, Day, Year) May 3, 1995		128. TIME OF DEATH (Month, Day, Year) 7:30 P.M.	
129. DATE OF DEATH (Month, Day, Year) May 3, 1995		130. TIME OF DEATH (Month, Day, Year) 7:30 P.M.		131. DATE OF DEATH (Month, Day, Year) May 3, 1995	
132. TIME OF DEATH (Month, Day, Year) 7:30 P.M.		133. DATE OF DEATH (Month, Day, Year) May 3, 1995		134. TIME OF DEATH (Month, Day, Year) 7:30 P.M.	
135. DATE OF DEATH (Month, Day, Year) May 3, 1995		136. TIME OF DEATH (Month, Day, Year) 7:30 P.M.		137. DATE OF DEATH (Month, Day, Year) May 3, 1995	
138. TIME OF DEATH (Month, Day, Year) 7:30 P.M.		139. DATE OF DEATH (Month, Day, Year) May 3, 1995		140. TIME OF DEATH (Month, Day, Year) 7:30 P.M.	
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192. TIME OF DEATH (Month, Day, Year) 7:30 P.M.		193. DATE OF DEATH (Month, Day, Year) May 3, 1995		194. TIME OF DEATH (Month, Day, Year) 7:30 P.M.	
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198. TIME OF DEATH (Month, Day, Year) 7:30 P.M.		199. DATE OF DEATH (Month, Day, Year) May 3, 1995		200. TIME OF DEATH (Month, Day, Year) 7:30 P.M.	

ORIGINAL AND STATISTICS COPY

THIS IS A TRUE AND EXACT REPRODUCTION OF THE DOCUMENT OFFICIALLY REGISTERED AT THE OFFICE OF THE DESCHUTES COUNTY REGISTRAR.

DATE ISSUED: May 5, 1995

FLORENCE BEND-TORRINO
COUNTY REGISTRAR
DESCHUTES COUNTY, OREGON

STATE OF OREGON: COUNTY OF CLATSOP: ss.

Filed for record at request of Klanth County title the 28th day of June A.D., 19 96 at 1:25 o'clock P.M., and duly recorded in Vol. M96 of Deeds on Page 19328

FEE \$35.00

Bernetha G. Letsch, County Clerk
By [Signature]