

KNOW ALL MEN BY THESE PRESENTS, That Michael B. Jager & Margaret H. Jager, as trustees of the Jager Family Trust Agreement dated Oct. 15, 1991 and Clark J. Kenyon, a married man for the consideration hereinafter stated, does hereby remise, release and quitclaim unto Donald E. Stoner and Jill Stoner hereinafter called grantee, and unto grantee's heirs, successors and assigns all of the grantor's right, title and interest in that certain real property with the tenements, hereditaments and appurtenances thereunto belonging or in any way appertaining, situated in the County of Klamath, State of Oregon, described as follows, to-wit:

Lots 5 and 6 in Block 9, Tract 1123, according to the official plat thereof on file in the office of the County Clerk, Klamath County, Oregon.

96 OCT 24 P 3:46

(IF SPACE INSUFFICIENT, CONTINUE DESCRIPTION ON REVERSE SIDE)

To Have and to Hold the same unto the grantee and grantee's heirs, successors and assigns forever.

The true and actual consideration paid for this transfer, stated in terms of dollars, is \$fulfillment

~~However, the actual consideration consists of or includes other property or value given or promised which is the whole part of the consideration (indicate which).~~ (The sentence between the symbols Ⓞ, if not applicable, should be deleted. See ORS 93.030.)

In construing this deed, where the context so requires, the singular includes the plural and all grammatical changes shall be made so that this deed shall apply equally to corporations and to individuals.

In Witness Whereof, the grantor has executed this instrument this 3rd day of January, 1995; if a corporate grantor, it has caused its name to be signed and its seal, if any, affixed by an officer or other person duly authorized thereto by order of its board of directors.

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 30.930.

STATE OF OREGON, County of ORANGE) ss.

This instrument was acknowledged before me on January 3, 1995,

by Michael B. Jager, Margaret H. Jager, as trustees and Clark J. Kenyon

by _____, 19____,

as _____,

of _____,



KATHLEEN L. SPENCER
COMM. #985636
Notary Public - California
ORANGE COUNTY
My Comm. Expires FEB 24, 1997

My commission expires !

Notary Public for Oregon
California

Grantor's Name and Address

Donald & Jill Stoner

1222 Chambers St

Stellacoom, WA 98388

Grantee's Name and Address

AmeriTitle

P.O. Box 4325

Sunriver OR 97707

Until requested otherwise send all tax statements to (Name, Address, Zip):

Donald & Jill Stoner

1222 Chambers St

Stellacoom, WA 98388

SPACE RESERVED
FOR
RECORDER'S USE

STATE OF OREGON,
County of Klamath) ss.

I certify that the within instrument was received for record on the 24th day of October, 1996, at 3:46 o'clock P.M., and recorded in book/reel/volume No. M96 on page 33725 and/or as fee/file/instrument/microfilm/reception No. 27294, Record of Deeds of said County.

Witness my hand and seal of County affixed.

Bernetha G. Letsch, County Clerk

By Kathleen R. Letsch, Deputy

STATE OF CALIFORNIA

DEPARTMENT OF HEALTH SERVICES

MTc

83-064002

CERTIFICATE OF DEATH

STATE OF CALIFORNIA

0190-020650

STATE FILE NUMBER 83-064002		LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER 0190-020650	
1A. NAME OF DECEDENT—FIRST WALTER		1B. MIDDLE HATHORN	
1C. LAST GRANCO		1D. DATE OF BIRTH (MONTH, DAY, YEAR) May 4, 1983	
2. SEX Male		3. RACE White	
4. ETHNICITY German		5. DATE OF BIRTH April 7, 1927	
6. DISTANCE OF DECEDENT (STATE OR FOREIGN COUNTRY) Colorado		7. PLACE AND DISTANCE OF FATHER Walter Granco; Illinois	
8. CITIZEN OF WHAT COUNTRY U.S.A.		9. MARRIAGE STATUS Married	
10. PRIMARY OCCUPATION Dispatcher		11. NUMBER OF YEARS THIS OCCUPATION 12	
12. USUAL RESIDENCE—STREET ADDRESS (STREET AND NUMBER OR LOCATION) 21500 Lassen Avenue #141		13. CITY OR TOWN Chatsworth	
14. COUNTY Los Angeles		15. STATE California	
16. PLACE OF DEATH Residence		17. NAME AND ADDRESS OF INFORMANT—RELATIONSHIP Dorothy Granco Wife 21500 Lassen Avenue #141 Chatsworth, California 91311	
18. STREET ADDRESS (STREET AND NUMBER OR LOCATION) 21500 Lassen Avenue #141		19. CITY OR TOWN Chatsworth	
20. DEATH WAS CAUSED BY: IMMEDIATE CAUSE Cardiopulmonary failure due to		21. INTERVAL BETWEEN ONSET AND DEATH years	
22. OTHER CONDITIONS CONTRIBUTING BUT NOT RELIABLE CAUSES OF DEATH Diabetes mellitus		23. WAS AUTOPSY PERFORMED FOR ANY CONDITION IN ITEM 22 OR 23? No	
24. I CERTIFY THAT DEATH OCCURRED AT THE HOME, DATE AND PLACE STATED FROM THE CAUSE STATED. I ATTENDED DECEDENT SINCE LAST SATISFACTORY ALIVE (ENTER NO. OF YEAR) 4/24/87 7/28/83		25. PHYSICIAN'S SIGNATURE AND ADDRESS David H. Winer, M.D. 10630 Sepulveda Blvd., Mission Hills, California	
26. SPECIFY ACCIDENT, SUICIDE, ETC.		27. PLACE OF INJURY 10630 Sepulveda Blvd., Mission Hills, California	
28. LOCATION (STREET AND NUMBER OR LOCATION AND CITY OR TOWN) 10630 Sepulveda Blvd., Mission Hills, California		29. DESCRIBE HOW INJURY OCCURRED (EVENTS WHICH RESULTED IN INJURY) None	
30. I CERTIFY THAT DEATH OCCURRED AT THE HOME, DATE AND PLACE STATED FROM THE CAUSE STATED. IT IS REQUIRED BY LAW THAT THIS BE AN (IMMEDIATE INVESTIGATION)		31. PHYSICIAN'S SIGNATURE AND ADDRESS David H. Winer, M.D. 10630 Sepulveda Blvd., Mission Hills, California	
32. DISPOSITION Cremation		33. DATE—MONTH, DAY, YEAR May 7, 1983	
34. NAME AND ADDRESS OF CEMETERY OR CREMATORY Pasadena Crematorium 415 E Orange Grove Ave., Pasadena, Ca.		35. EXAMINER'S LICENSE NUMBER AND EXPIRATION DATE 6517 1/1/84	
36. NAME OF FURNERAL DIRECTOR (OR PERSON ACTING AS SUCH) BASTIAN & PERROTT MORTUARY		37. LOCAL REGISTRATION—SIGNATURE Robert A. Perrott	
38. STATE REGISTRAR 7		39. DATE ACCEPTED BY LOCAL REGISTRATION MAY 05 1983	

This is to certify that this document is a true copy of the official record filed with the Office of Vital Records and Statistics.

S. Kimberly Belshe, Director and State Registrar of Vital Records and Statistics by: *Pete Abbott*

GEORGE B. (PETER) ABBOTT JR., M.D., M.P.H. CHIEF OFFICE OF VITAL RECORDS AND STATISTICS

DATE ISSUED

This copy not valid unless prepared on engraved border displaying seal and signature of Registrar

OCT 15 1996

AN ALTERATION OR REVISION INVALIDATES THIS CERTIFICATE

176856

STATE OF OREGON: COUNTY OF KLAMATH: ss.

Filed for record at request of Amerititle the 24th day of October A.D., 19 96 at 3:46 o'clock P M., and duly recorded in Vol. M96 of Deeds on Page 33726.

Bernetha G. Ketsch County Clerk

By *Kathleen Ketsch*

FEE \$10.00