

STATUTORY WARRANTY DEED

PAULINE K. COX	
conveys and warrants toJOE_L, SHODIN	, Grantor,
the following described real property free of liens and c LOT 2 IN BLOCK 8 OF TRACT 1093 PINECRI THEREOF ON FILE IN THE OFFICE OF THE (Grantee, encumbrances, except as specifically set forth herein: EST ESTATES, ACCORDING TO THE OFFICIAL PLAT COUNTY CLERK OF KLAMATH COUNTY, OREGON.
This property is free of liens and encumbrances, EXCEPT: Reservations and restrictions of record, rights of way, and easements of record and those apparent upon the land, contracts and/or liens for irrigation and/or drainage.	
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.	
The true consideration for this conveyance is \$	12,500,00 (Here comply with the requirements of ORS 93.030)
Dated this 17 day of August 19	_98
PAULINE K. COX STATE OF OREGON County of LAKE BE IT REMEMBERED, That on this 20th day of August 19 98 before me, the understand a Netger Public in and for aid County of Lake	
undersigned, a Notary Public in and for said County and State, personally appeared the within named	
known to me to be the identical individualdescribed in and who executed the within instrument and acknowledged to me thatsheexecuted the same freely and voluntarily. IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my official seal the day and year last above written. OFFICIAL SEAL SHERRY K. CALDWELL NOTARRY PUBLIC - OREGON COMMISSION NO. 047844 MY COMMISSION NO. 047844 MY COMMISSION EXPIRES NOV. 06, 1999 My Commission expires	
Title Order No. K52827D Escrow No. K52827D After recording return to: JOE L. SHODIN PO BOX 976 BURNS 97622 Name, Address, Zip Until a change is requested all tax statement shall be sent to the following address. JOE L. SHODIN PO BOX 170 BLY QR 97622 Name, Address, Zip	STATE OF OREGON, County of Klamath ss. Filed for record at request of:
	Fee. \$30.00