

RECORDING REQUESTED BY

ASPEN 04049569⁹⁹ JUL 10 P3:34

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

NAME DAVID M. PHILIPS
STREET 3992 Brockton Avenue
ADDRESS Riverside, CA 92501
CITY, STATE & ZIP CODE
TITLE ORDER NO. _____ ESCROW NO. _____

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State of Oregon, County of Klamath
Recorded 6/10/99, at 3:34 p.m.
In Vol. M99 Page 23013
Linda Smith,
County Clerk Fee \$ 30 - KR

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), Richard Du Puis
(NAME OF GRANTOR(S))

grant to David M. Philips

all that real property situated in the City of _____ (NAME OF GRANTEE(S))
_____ (or in an unincorporated area of)
Klamath County, Oregon described as follows (insert legal description):
(NAME OF COUNTY) (STATE)

Lot 7, Block 60, KLAMATH FALLS FOREST ESTATES HIGHWAY 66 UNIT, PLAT NO.2,
in the County of Klamath, State of Oregon.

CODE 219 MAP 3811-16DO TL 4800

Assessor's parcel No. _____

Executed on June 3, 99, at Pasadena, Ca
(CITY AND STATE)

STATE OF California

COUNTY OF Los Angeles

On 6/3/99 before me, **PATRICIA BORDONARO**

personally appeared RICHARD DU PUIS (NAME/TITLE, IF JAMES DOE, NOTARY PUBLIC)
(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.

Patricia Bordonaro
(SIGNATURE OF NOTARY) (SEAL)

MAIL TAX
STATEMENTS TO: _____

Before you use this form, fill in all blanks, and make whatever changes are appropriate and necessary to your particular transaction. Consult a lawyer if you doubt the form's fitness for your purpose and use. No costs made no representation or warranty, express or implied, with respect to the reliability or fitness of this form for an intended use or purpose.

WOLCOTT FORM 77E Rev. 1/94b (price class 3A)
GRANT DEED 1994 WOLCOTT FORMS, INC.

RIGHT THUMBPRINT (Optional)



CAPACITY CLAIMED BY SIGNER(S)

☐ INDIVIDUAL(S)
☐ CORPORATE
OFFICER(S)

☐ PARTNER(S) ☐ LIMITED
☐ GENERAL
☐ ATTORNEY IN FACT
☐ TRUSTEE(S)
☐ GUARDIAN/CONSERVATOR
☐ OTHER

SIGNER IS REPRESENTING
(Name of Person or Entity)



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