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NN	21014
JOSEPH R. DANIEL	Vol_M01_Page 31614
7062 Tranquility Dr.	STATE OF OREGON, /   Se
Sacramento Ca 95823	County of
R E T, INC. Grantor's Name and Address	I certify that the vithin instrument was
RET, INC.	received for recording on
c/o Pauline Browning HC71, Box 495C	at o'clock /M., and recorded in
Hanover Mean Bona La Addison	book/reel/volume No on page
R Addr religion to (Name, Address, Zip):	and/or as fee/file/instrument/microfilm/reception No, Records of this County.
	RDER'S USE
HC71, Box 495C	Witness my hand and seal of County affixed.
Hanover, NM 88041	/
Until requested otherwise, send all tax statements to (Name, Address, Zip):	NAME TITLE
R_E_T,_INC.	
c/o Pauline Browning	By, Deputy.
HC71, Box 495C Hanover, NM 88041	
Hallover - Nat - 8804T	•
WARRAN	TY DEED
KNOW ALL BY THESE PRESENTS that	
KNOW ALL BY THESE PRESENTS that JOSEPH R. DANIEL	
	to grantor paid by
	· · · · · · · · · · · · · · · · · · ·
hereinafter called grantee, does hereby grant, bargain, sell and co	nvey unto the grantee and grantee's heirs, successors and assigns,
that certain real property, with the tenements, hereditaments and	I appurtenances thereunto belonging or in any way appertaining, regon, described as follows, to-wit:
situated in County, State of O	regon, described as follows, to-wit:
LOT 05, BLOCK 108, KLAMATH FALLS FOR	FOT FOTATES UTCHWAY 66 DIAM 4
-01 00, 2200K 200, KIMMIN PAULS FOR	SSI ESIAIES, RIGHWAI 66, PLAT 4
KLAMATH COUNTY, OREGON	
(IE SPACE INSUESICIENT CONTINUE	E DESCRIPTION ON BEVERSE SIDE)
(IF SPACE INSUFFICIENT, CONTINUI To Have and to Hold the same unto grantee and grantee's	,
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## CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California	)
County of DACRAMENTO	) ss.
On 06-04-01 , before me,	R. PRASM)  Name and Title of Officer (e.g., "Jane Doe, Notary Public")  R. DANIEL  Name(s) of Signer(s)
personally appeared OSEPH	Name(s) of Signor(s)
	☐ personally known to me  □ personally known to me  □ personally known to me  □ personally known to me  evidence
R. PRASAD COMM. # 1208147 Notary Public-California 9 SACRAMENTO COUNTY 7 My Comm. Expires JANUARY 15, 2003	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(e), of the entity upon behalf of which the person(s) acted, executed the instrument.  WITNESS my hand and official seal.
Place Notary Seal Above	Signalure of Notary Public
	OPTIONAL
	law, it may prove valuable to persons relying on the document I and reattachment of this form to another document.
Description of Attached Document	•
Title or Type of Document:	
Document Date:	<del>-</del>
Signer(s) Other Than Named Above:	
Signer(s) Other Than Named Above:  Capacity(ies) Claimed by Signer  Signer's Name:   Individual   Corporate Officer — Title(s):   Partner —   Limited   General   Attorney in Fact   Trustee   Guardian or Conservator   Other:  Signer Is Representing:	RIGHT THUMBPRINT
□ Individual	OF SIGNER Top of thumb here
☐ Corporate Officer — Title(s):	Top of multip field
☐ Partner — ☐ Limited ☐ General	
☐ `Attorney in Fact	
☐ Trustee	
☐ Guardian or Conservator	
U Oiner:	
Signer Is Representing:	

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State of Oregon, County of Klamath Recorded 06/29/01, at 2:44 p. m. In Vol. M01 Page 3/6/4 Linda Smith, County Clerk Fee\$ 2600