NN I		Vol. <u>M02</u> F	Page 3353	ઠ્ઠ 🦆
JUN 6 PM3:07		STATE OF OREGON		\
Grantor's Name and Address Carol F. Willacker				
445 B Oneawa Street				
Kailua, HI 96734 Grantee's Name and Address				
After recording, return to (Name, Address, Zip):	SPACE RESERVED FOR			
	RECORDER'S USE	64 4 60	County of Klam	ath .
		State of Oregon, C Recorded 06/06/2002	2 3:07 ρ.	_m.
Until requested otherwise, send all tax statements to (Name, Address, Zip): Carol Willacker		Vol M02. Pg 33 Linda Smith, County		
445 B Oneawa Street Kailua, Hi 96734			of Pgs _/	— puty.
	MTC			
	6109-MS			
DODE:	TCLAIM DEED CRT J. WILLA	CKER		
KNOW ALL BY THESE PRESENTS that				
pereinafter called grantor, for the consideration hereinafter stacker.	ated, does hereby	remise, release and fore	ever quitclaim unt	to
hereinafter called grantee, and unto grantee's heirs, successor				
real property, with the tenements, hereditaments and appurt	enances thereunt	o belonging or in any	way appertaining	, situated in
Lot 13 in Block 21, MT. SCOTT MEADO		The state of the s	l plat there	of
on file in the office of the County Clerk				
(IF SPACE INSUFFICIENT, CO To Have and to Hold the same unto grantee and grante				
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