

03 JAN 13 PM 2:24  
NOT 12M 12 PM 3:04

NN

Vol M03 Page 02125  
STATE OF OREGON,

BERNARD D. MILBERGER  
28890 Lilac Rd, Space 142  
Valley Center, Ca 92082

Grantor's Name and Address  
D T SERVICE CO., INC.  
c/o Pauline Browning  
HC71, Box 495C  
Hanover, NM 88041

Grantor's Name and Address  
D T SERVICE CO., INC.  
c/o Pauline Browning  
HC71, Box 495C  
Hanover, NM 88041

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

D T SERVICE CO., INC.  
c/o Pauline Browning  
HC71, Box 495C  
Hanover, NM 88041

SPACE RESERVED  
FOR  
RECORDER'S USE

State of Oregon, County of Klamath  
Recorded 01/13/2003 2:24 p. m.  
Vol M03 Pg 02125-26  
Linda Smith, County Clerk  
Fee \$ 26.00 # of Pgs 2 eputy.

WARRANTY DEED

KNOW ALL BY THESE PRESENTS that  
BERNARD D. MILBERGER

hereinafter called grantor, for the consideration hereinafter stated, to grantor paid by  
D T SERVICE CO., INC. A NEVADA CORPORATION

hereinafter called grantee, does hereby grant, bargain, sell and convey unto the grantee and grantee's heirs, successors and assigns,  
that certain real property, with the tenements, hereditaments and appurtenances thereunto belonging or in any way appertaining,  
situated in KLAMATH COUNTY County, State of Oregon, described as follows, to-wit:

LOT 31, BLOCK 50, KLAMATH FOREST ESTATES, 1ST ADDITION

KLAMATH COUNTY, OREGON

(IF SPACE INSUFFICIENT, CONTINUE DESCRIPTION ON REVERSE SIDE)

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

And grantor hereby covenants to and with grantee and grantee's heirs, successors and assigns, that grantor is lawfully seized  
in fee simple of the above granted premises, free from all encumbrances except (if no exceptions, so state):

and that  
grantor will warrant and forever defend the premises and every part and parcel thereof against the lawful claims and demands of all  
persons whomsoever, except those claiming under the above described encumbrances.

The true and actual consideration paid for this transfer, stated in terms of dollars, is \$ 2000.00  
However, the actual consideration consists of or includes other property or value given or promised which is the whole part of the (indicate which) consideration. (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 on 1/4/03; if grantor  
is a corporation, it has caused its name to be signed and its seal, if any, affixed by an officer or other person duly authorized to do so  
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 REGU-  
LATIONS. BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON  
ACQUIRING FEE TITLE TO THE PROPERTY SHOULD CHECK WITH THE APPRO-  
PRIATE 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.

BERNARD D. MILBERGER

Bernard D. Milberger

CALIFORNIA  
STATE OF CALIFORNIA, County of San Diego

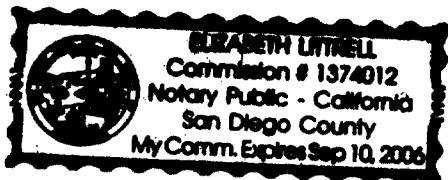
This instrument was acknowledged before me on 1/6/03  
by Bernard D. Milberger

This instrument was acknowledged before me on

by

as

of



Elizabeth Littell  
Notary Public for Oregon CALIFORNIA  
My commission expires 9/10/06

26A

CERTIFICATION OF VITAL RECORD

COUNTY of SAN BERNARDINO

02126

DEPARTMENT OF PUBLIC HEALTH  
351 MT. VIEW AVENUE, SAN BERNARDINO, CALIFORNIA 92415-0010

CERTIFICATE OF DEATH

35 D-35H-800

STATE FILE NUMBER		USE BLACK INK ONLY		LOCAL REGISTRATION DISTRICT AND CERTIFICATE NUMBER	
1A. NAME OF DECEDENT—FIRST (GIVEN) EVA		1B. MIDDLE LOUISE		1C. LAST (FAMILY) MILBERGER	
4. RACE Caucasian		5. SPANISH/HISPANIC—SPECIFY <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		6. DATE OF BIRTH—MO. DAY, YR. Dec. 4, 1931	
8. STATE OF BIRTH OK		9. CITIZEN OF WHAT COUNTRY U.S.A.		10. STATE OF BIRTH OK	
12. MILITARY SERVICE? 19__ TO 19__ <input checked="" type="checkbox"/> NONE		13. SOCIAL SECURITY NO. 550-42-1412		14. MARITAL STATUS Married	
16A. USUAL OCCUPATION Homemaker		16B. USUAL KIND OF BUSINESS OR INDUSTRY Own Home		16C. USUAL EMPLOYER Self	
18A. RESIDENCE—STREET AND NUMBER OR LOCATION 20800 Halsted Road		18B. CITY Hinkley		18C. ZIP CODE 92347	
19A. PLACE OF DEATH KAISER HOSPITAL		19B. IF HOSPITAL, SPECIFY ONE: IP ER/OP, DOA IP		19C. COUNTY SAN BERNARDINO	
21. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR A, B, AND C) IMMEDIATE CAUSE (A) METASTATIC MELANOMA DUE TO (B) MELANOMA ON BACK DUE TO (C)		22. WAS DEATH REPORTED TO CORONER? REFERRAL NUMBER <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		23. WAS BIOPSY PERFORMED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
25. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN 21 NONE		26. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 21 OR 25? IF YES, LIST TYPE OF OPERATION AND DATE. NONE		27. TYPE ATTENDING PHYSICIAN'S NAME AND ADDRESS GERALD BATTERSBY M.D. 9961 SIERRA FONTANA CA. 92335	
34A. DISPOSITION(S) Burial		34B. PLACE OF FINAL DISPOSITION—NAME AND ADDRESS Riverside Nat'l Cem. 22495 Van Buren Riverside, Ca. 92508		34C. DATE 8-22-1989	
36A. NAME OF FUNERAL DIRECTOR (OR PERSON ACTING AS SUCH) Colton Funeral Chapel, 1275 N. Colton, Calif. 92324		36B. LICENSE NO. F-1031		37. SIGNATURE OF LOCAL REGISTRAR George R. Pettersen MD	
38. REGISTRATION DATE August 17, 1989		39. CENSUS TRACT 0902		40. DATE OF DEATH August 15, 1989	

11 (REV. 3-89)

ERASURES, WHITEOUTS, OR OTHER ALTERATIONS

Bernard D Milberger  
28890 Liao Rd Sp 142  
Valley Center CA 92082

CERTIFIED COPY OF VITAL RECORDS

DATE ISSUED AUGUST 22, 1989

COUNTY OF SAN BERNARDINO

This is a true and exact reproduction of the document officially registered and placed on file in the VITAL RECORDS SECTION, SAN BERNARDINO DEPARTMENT OF PUBLIC HEALTH.

GEORGE R. PETERSEN, M.D.  
COUNTY HEALTH OFFICER  
REGISTRAR OF VITAL STATISTICS

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