AmeriTitle

THIS SPACE RESERVED FOR RECORDER'S USE

	Vol. M03 Page 02726
After recording return to: THOMAS M. TITUS Until a change is requested all tax statements shall be sent to the following address:	State of Oregon, County of Klamath Recorded 01/15/2003 //:02 //m. Vol M03 Pg 02726 - 28 Linda Smith, County Clerk Fee \$ 3/00 # of Pgs 3
Escrow No. MT59359-TM Title No.	
WAR	RANTY DEED
<pre>in common, Grantor(s) hereby grant, bargain, s THOMAS M. TITUS and OLIVE K. TITUS, Grantee(s) and grantee's heirs, suc</pre>	as tenants by the entirety cessors and assigns the following described except as specifically set forth herein in
Lot 22, Block 12, STEWART ADDIT thereof on file in the office o Oregon.	ION, according to the official plat f the County Clerk of Klamath County,
	062305 09-007BD-04400
any, as of the date of this deed an and the grantor will warrant and fo part and parcel thereof against the	ord and those apparent upon the land, if d those shown below, if any: rever defend the said premises and every lawful claims and demands of all persons nder the above described encumbrances.
The true and actual consideration f	or this conveyance is \$ 53,000.00.
IN VIOLATION OF APPLICABLE LAND USE ACCEPTING THIS INSTRUMENT, THE PERS SHOULD CHECK WITH THE APPROPRIATE CAPPROVED USES AND TO DETERMINE ANY PRACTICES AS DEFINED IN ORS 30.930.	
Dated this 7 ⁴ day of James	y , 2003 .
Mous Jane Melue	

State of Washington) ss County of)

On this day personally appeared before me MARY JANE MELINK to me known to be the individual described in and who executed the within and foregoing instrument, and acknowledged that she signed the same as her free and voluntary act and deed, for the uses and purposes therein mentioned.

GIVEN under my hand official-seal this The day of January, 2003.

THE OF WASHING

My appointment expires 13305

INDIVIDUAL ACKNOWLEDGMENT

State/Commonwealth of OPEGOA]
State/Commonwealth of OPEGON County of Dougles	ss .
On this the 13th day of Janua	ARY , 2003 , befor
On this the 13th day of JA/U Day day J-HA Name of Notary Pub	the undersigned Notar
Public, personally appeared	HAR F. TAULOR Name(s) of Signer(s)
	personally known to me - OR -
	proved to me on the basis of satisfactor evidence
	to be the person(s) whose name(s) is/ar subscribed to the within instrument, an acknowledged to me that he/she/the executed the same for the purposes there stated.
	WITNESS my hand and official seal.
MY COMMISSION EPPRES APPIL 1, 2008	Signature of Notary Public RONALD J. HANLIN Other Required Information (Printed Name of Notary, Residence, et
Place Notary Seal and/or Any Stamp Above	
OI	PTIONAL
Although the information in this section is not requ persons relying on the document and could prevent of this form to another document.	rired by law, it may prove valuable to fraudulent removal and reattachment Right Thumbpring of Signer Top of thumb he
Description of Attached Document	
Title or Type of Document:	
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Signer(s) Other Than Named Above:	PTIONAL Initiated by law, it may prove valuable to fraudulent removal and reattachment Der of Pages: O. Box 2402 • Chatsworth, CA 91313-2402 • www.national Reporter: Call Toll-Free 1-800 US NOTARY (1-800

INDIVIDUAL ACKNOWLEDGMENT

	`	
State/Commonwealth of Oxogoo	ss.	
County of mulmonds.	J	
On this the	100 Jan	before
On this the day of me, Name of Notary Pu	Month Yea	r :
me, Name of Notary Pu	blic , the unde	ersigned inotary
Public, personally appeared Time	thy 3 Taylor.	
	□ personally known to me –	OR -
	proved to me on the basi	
	evidence	s or satisfactory
	to be the person(s) whose	name(s) is/are
OFFICIAL SEAL	subscribed to the within in	·
OFFICIAL SEAL JENNIFER OSTERHOLM	acknowledged to me the executed the same for the p	
NOTARY PUBLIC - OREGON COMMISSION NO. 361053	stated.	•
MY COMMISSION EXPIRES SEPT. 9, 2006	WITNESS my hand and office	cial seal.
	William and one	<u> </u>
	Jonnison Con	whalve
	Signature of Notary I	
	Other Required Information (Printed Name of	Notary, Residence, etc.
		•
Place Notary Seal and/or Any Stamp Above		
Although the information in this section is not requ	PTIONAL	RightThumbprint
persons relying on the document and could prevent of this form to another document.	fraudulent removal and reattachment	of Signer Top of thumb here
Description of Attached Document		
Title or Type of Document:		
Document Date: Numl	ber of Pages:	
Signer(s) Other Than Named Above:		
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