PUBLISHER'S NOTE: ORS 93.125 requires that grantor provide grantee with a notice and certain information regarding possible construction lien claims against the property. (Use Stevens-Ness Form No. 532, Construction Lien Notice from Seller to Purchaser.)

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California	1
county of Santa Clara	ss.
County of Janua Clara	J
On 5-19-03 before me, spersonally appeared Donna J. Erns	
On 5-19-03 before me.	Judith Carrasa
Date	Name and Title of Officer (e.g., "Jane Doe, Notary Public")
personally appeared Donna J. Eins	of + Darwin K. Eine
•	Hame(s) or Signer(s)
	personally known to me
	The proved to me on the basis of satisfa-
	evidence
	to be the person(s) whose name(s) \u00ec
JUDITH CARRASCO	subscribed to the within instrument
Commission # 1237549	acknowledged to me that he/she/they exec
Notary Public - California	the same in his/her/their autho
Z POLICE TO Orange County	capacity(ies), and that by Ns/Ner.
My Comm. Expires Oct 10, 2003	signature(s) on the instrument the person(
	the entity upon behalf of which the pers
	acted, executed the instrument.
	WITNESS my hand and official seal.
	Chalith (man)
	Signature of Notary Public
	\mathcal{O}
OPTIC	ONAL
Though the information below is not required by law, it may prove	
fraudulent removal and reattachmer	nt of this form to another document.
Description of Attached Document	
Title or Type of Document:	
•	
Title or Type of Document:	
Document Date:	Number of Pages:
Document Date:Signer(s) Other Than Named Above:	Number of Pages:
Document Date: Signer(s) Other Than Named Above: Capacity(ies) Claimed by Signer	Number of Pages:
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Document Date: Signer(s) Other Than Named Above: Capacity(ies) Claimed by Signer Signer's Name: Individual	Number of Pages: RIGHT THUME OF SIGNE Top of thumb
Document Date:	Number of Pages: RIGHT THUME OF SIGNE Top of thumb
Document Date: Signer(s) Other Than Named Above: Capacity(ies) Claimed by Signer Signer's Name: Individual Corporate Officer — Title(s): Partner — Limited General	Number of Pages: RIGHT THUME OF SIGNE Top of thumb
Document Date: 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	Number of Pages:
Document Date: 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	Number of Pages:
Document Date: 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	Number of Pages: RIGHT THUME OF SIGNE Top of thumb
Document Date: 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	Number of Pages: RIGHT THUME OF SIGNE Top of thurnt
igner(s) Other Than Named Above: Capacity(ies) Claimed by Signer igner's Name: Individual Corporate Officer — Title(s): Partner — _ Limited _ General Attorney-in-Fact Trustee Guardian or Conservator	Number of Pages: RIGHT THUM OF SIGN Top of thum

Survivirus and Constructivirus and a large protective process and exercise exercisive process as a second con-