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First American Title Insurance Company of Oregon CRATER TITLE DIVISION

Main Office 300 West Main • P.O. Box 250 Medford, Oregon 97501 (541) 779-7250 • FAX (541) 779-4013

State of Oreg	on, Co	untv a	of Klar	nath
Recorded 05/23	3/2003	ラン	40	m
Vol M03 Pg 🛫	552.	55	-	
Linda Smith, C	ounty C	lerk		
Fee \$ 2/00		Pgs	/	

KNOW ALL MEN BY THESE PRESENTS, That MICHAEL J. GRABOWSKI, Grantor, conveys and warrants to LACEY A. HANNS, Grantee, the following described real property, together with appurtenances, free of encumbrances except as specifically set forth herein, situated in Klamath County, Oregon, described as follows, to-wit: Lot 51 of Skyline View, according to the official plat thereof on file in the office of the County Clerk of Klamath County, Oregon. SUBJECT TO: Restrictions, reservations, covenants, conditions and any other encumbrances of record, or apparent on the ground. The true consideration paid for this conveyance is One Hundred Ten Thousand And 00/100 DOLLARS \$110,000.00. ☐ However, the whole consideration includes other value given or promised (check if other consideration statement applies. This instrument will not allow use of the property described in this instrument in violation of applicable land use laws and regulations. Before signing or accepting this instrument, the person acquiring fee title to the property should check with the appropriate 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. Dated this 16 th __ day of May, 2003. MICHAEL J. GRABOWSKI STATE OF OREGON

) ss.

County of Jackson

This instrument was acknowledged before me on the day of leaver of the day of leaver of le

This instrument was acknowledged before me on the ______ day of May, 2003 by MICHAEL J. GRABOWSKI.

OFFICIAL SEAL
eal)SHANNON McCOY
NOTARY PUBLIC-OREGON
COMMISSION NO. 367084
MY COMMISSION EXPIRES MAY 13, 2007

Notary Public for Oregon
My commission expires: 51307

Until a change is requested, send all tax statements to: Grantee at:

Return document to: First American Title Insurance Co. 300 W. Main Street, P.O. Box 250 Medford, OR 97501

Vision Form SDD03OR Rev. 05/15/97

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