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After Recording Return to: DALE G. SEVERNS 702 Summers

Klamath Falls OR Until a change is requested all tax statements Shall be sent to the address shown above.

Page

State of Oregon, County of Klamath Recorded 08/05/04\_ Vol M04 Pg 5/562

Linda Smith, County Clerk Fee \$ 76 \_ # of Pgs

LORNA J. WILSON, herein called Grantor, convey(s) to DALE G. SEVERNS, herein called Grantee, all that real property situated in the County of KLAMATH, State of Oregon, described as:

A tract of land situate in the SE 1/4 of the SE 1/4 of the NE 1/4 of Section 10, Township 39 South, Range 9 East of the Willamette Meridian, Klamath County, Oregon, more particularly described as follows:

Beginning at a point on the Westerly line of Summers Lane, which point lies North 1° 08' West 144.5 feet and North 1° 12' West 246.7 feet from the Northeast corner of Landis Park and from said point of beginning, running thence along the Westerly line of Summers Lane North 1° 12' West 80 feet; thence South 88° 44' West 200 feet; thence South 1° 12' East parallel with Summers Lane 80 feet; thence North 88° 44' East 200 feet to the point of beginning.

and covenant(s) that grantor is the owner of the above described property free of all encumbrances except covenants, conditions, restrictions, reservations, rights, rights of way and easements of record, if any, and apparent upon the land, contracts and/or liens for irrigation and/or drainage

and will warrant and defend the same against all persons who may lawfully claim the same, except as shown above.

The true and actual consideration for this transfer is \$116,600.00. (here comply with the requirements of ORS 93.930)

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 August 5, 2004.

STATE OF OREGON, County of Klamath) ss.

On Strument to be her voluntary act and deed.

This document is filed at the request of:

ASPEN TITLE & ESCROW, INC.

525 Main Street Klamath Falls, OR 97601 Order No.: 00059682

Notary Public for Oregon

My commissi

My commission expires: March 22, 2005

Official Seal

OFFICIAL SEAL
MARLENE T. ADDINGTON
NOTARY PUBLIC-OREGON
COMMISSION NO. 343314
MY COMMISSION EXPIRES MAR. 22, 2

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[	NAME Robert	Ā	rthur		WILSO	<b>X7</b>	М	ale	April	23, 1999
į	4. SOCIAL SECURITY NUMBER	Se. AGE-Last Birthday (Years)	5b. Under 1 Yes	ır 5c im	ider 1 Day	S. BIRTHE	LACE (City an Sta	w x Foreign	7. DATE OF E	SIRTH (Month, Day, Y
f	542-44-2868	58	Mos Days	Hours /	Mrs.	Gren	dale, CA		Octobe	er 30, 1940
	8. WAS DECEDENT EVER IN U.S. ARMED FORCES?		A			DEATH (C	heat only one)			<del></del>
CEDENT	12 Yes AND	OSPITAL   Inpatient	☐ ER/Outpatient	2 v∞a	OTHER [] N	tursing Hon	ne Docedent's H	ome XI Oth	er (Specify) j	ob site
	9b. FACILITY NAME (If not insit	tution, give street and nur	nber)				LOCATION OF DEA			9d. COUNTY OF DEA
	33833 McCart	e Lane			Bonanza				Klamath	
	10a. DECEDENT'S USUAL OCC (Give kind of work done duri Do <u>pol</u> , use retired.)	INESSANDUST	'RY	]	11 MARITAL STATU Never Married, W Divorced (Specify	idowed.	12. SPOUSE	(If Married, Widowed)		
	Land Surveyo	r	US Fore	est Ser	vice		Marrie	1	Lorna	3
ı	13a RESIDENCE - STATE 13	3b. COUNTY	13c. CITY, TOW	IN OR LOCATIO	ON .		Jd. STREET AND N	UMBER	<del></del>	
	Oregon	Klamath	K1ai	math Fa	11s	1	3702 Sum	ners La	ane	
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(	□Yes \$100 976	03 Specify	·			Wh.	ite	12		
RENTS	17. FATHER - NAME   Inst	middle lasi	18 MOTHER - NA	ME first	maidle r	maiden	19, IN	FORMANT - I	NAME and reli	stionship to deceased
THE STATE OF	Norman Mills		May A	nnette	Carr		Lo.	rna Wil	lson -	wife
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	Donation Other (Specify)		<u> </u>	a Memor	ial Pa			Bonanza	-	<b>jon</b>
	21a. SIGNATURE OF OREGON FL PERSON APPINDIAS SUCH	UNERAL SERVICE LICEN	SEE OR 2	21b. OREGON L		22. NAM	IE, ADDRESS AND Z	P OF FACILIT	Υ.	
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/		LETED BY CERTI		IAN -	_\	Tic .	<b>第24章</b>	KAN YA	(NE DES	<b>SECURE OF</b>
	27. TIME OF DEATH 28	. WAS MEDICAL EXAMI	VER NOTIFIED?		3	la. TIME O	4	TE PRONOL	INCED DEAD	(Month, Day, Year, H
1	·	Ø Yes □ No		·	1	114	<sup>3</sup> / u		^	
	29. To the best of my knowledge due to the cause(s) and mar	s, death occurred at the	time, date, place an	<b>d</b>	3	2. On the l	asis of examinatione, date, place and	n and/or inve	stigation, in	my opinion death occ
IFIEA	(Signature)			* *		Signal	und)	400 TO TO	Z and	
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	30. DATE SIGNED (Month, Da)	y. Year]	-	· · ·	- 27	DAYES	GNED Month, Day	500	SI	COUNTY
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REGISTERED AT THE OFFICE OF THE KLAMATH COUNTY REGISTRAR.

APR 2 9 1999

Mancy Kynnedy

NANCY KENNEDY

COUNTY REGISTRAR

KLAMATH COUNTY, OREGON



DATE ISSUED: