THIS INSTRUMENT WILL NOT ALLOW USE IN THIS INSTRUMENT IN VIOLATION OF A AND REGULATIONS. BEFORE SIGNING OF THE PERSON ACQUIRING FEE TITLE TO TI WITH THE APPROPRIATE CITY OR COUNT VERIFY APPROVED USES.

ASSESSOR PARCEL No. P361-094-2200-000 NOTE: Deed prepared by Grantor below. NAME: MICHAEL N. KINCADE ADDRESS: 3900 HANCOCK DR CITYISTIZIP: ADAMENTE CA SACRAMENTE, CA 95821 WHEN RECORDER MAIL TO (GRANTEE): MAIL TAX STATEMENTS TO (GRANTEE): NAME: MARK + VANESSA MASON ADDRESS: 215 GREAT LAWN CITY/ST/ZIP:

2012-009222

Klamath County, Oregon



My Comm. Expires Sep 3, 2015

00123047201200092220010012

08/21/2012 09:24:06 AM

Fee: \$37.00

				SALFOUNE
SPECIAL	WARR	ANTY	DEED	\$ 1527,-

SPECIAL W	ARRANTY DEED # 1527
FOR VALUABLE CONSIDERATION, receipt of white is/are.	ch is acknowledged, the Grantor (Seller) whose name(s)
Does conveys and specially warrants to:	LANESSA MASON
Grantee, the following described real property free	e of encumberances created by the Grantor, situated in CUNTY, OREGON
LOTSO BLOCK 49 FOUR	HADDITION TO
Witness Whereof, my hand has been set on	7/19 20/22 Warks Val 634 11/9898
Print on line above	Signature on line above Mark & Vanessa Mason Print on line above Mark Masow
On,20	State of California, County of Sauron to State of California, County of Sauron to State of Sauron to Constitution of Sauron to
Notary Public in and for said County and State	the paracital sho appears (seed)
My commission expires on:	CHRISTINE SHIMADA Commission # 1950878 Notary Public - California Placer County