

NA 92548

ELIZABETH WEDEMEYER

12-16-94P03:45 RCVD

WARRANTY DEED - STATUTORY FORM
INDIVIDUAL GRANTOR

Vol 194 Page 38000

ATC #04042453

conveys and warrants to LEANNE B. CAKUS AND RONALD V. SPARKS, with the right of survivorship, Grantor,except as specifically set forth herein situated in KLAMATH County, Oregon, to-wit:
State of Oregon. Lots 20, 21 and 22, Block 3, SUN FOREST ESTATES, TRACT 1060, in the County of Klamath,

TAX ACCT. NO. 2310-3680-7200, 7300, 7400

(IF SPACE INSUFFICIENT, CONTINUE DESCRIPTION ON REVERSE SIDE)
The property is free from encumbrances except THOSE SHOWN ON THE REVERSE SIDE IF ANYThe true consideration for this conveyance is \$10,000.00 (Here comply with the requirements of ORS 93.030)Dated this 7th day of December, 1994.

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.

Elizabeth Wedemeyer
ELIZABETH WEDEMEYERSTATE OF OREGON, County of _____) ss.
This instrument was acknowledged before me on _____, 19____,
by ELIZABETH WEDEMEYERNotary Public for Oregon
My commission expires _____

WARRANTY DEED

ELIZABETH WEDEMEYER
LEANNE B. CAKUSGRANTOR
GRANTEEGRANTEE'S ADDRESS, ZIP
After recording return to:LEANNE B. CAKUS
RONALD V. SPARKS
573 SOSCOL AVE APT C
NAPA, CA 94558

NAME, ADDRESS, ZIP

Until a change is requested, all tax statements
shall be sent to the following address:LEANNE B. CAKUS
573 SOSCOL AVE APT C
NAPA, CA 94558
S13811KM

NAME, ADDRESS, ZIP

SPACE RESERVED
FOR
RECORDER'S USE

STATE OF OREGON,

County of _____ } ss.

I certify that the within instru-
ment was received for record on the
_____ day of _____, 19____,
at _____ o'clock _____ M., and recorded
in book/recd/volume No. _____ on
page _____ or as fee/file/instru-
ment/microfilm/reception No. _____,
Record of Deeds of said County.Witness my hand and seal of
County affixed.

NAME

TITLE

By _____ Deputy

1. Subject to rules and regulations of Fire Patrol District.
2. Conditions, Restrictions as shown on the recorded plat of Sun Forest Estates, Tract 1060.
3. Declaration of Conditions and Restrictions, but omitting any restrictions based on race, color, religion or national origin appearing of record:
Recorded: September 19, 1972
Book: M-72
Page: 10585

Said Covenants, Conditions and Restrictions set forth above contain among other things, levies and assessments of Sun Forest Estates Owners Association.

4. Articles of Association, imposed by instrument, including the terms and provisions thereof, recorded September 18, 1972 in Book M-72 at Page 10581.

5. Easement, including the terms and provisions thereof:
For: Right of way 125 feet in width for power transmission over the W1/2 W1/2 of Sec. 36
Granted to: United States of America
Recorded: June 30, 1972
Book: M-72
Page: 7124

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

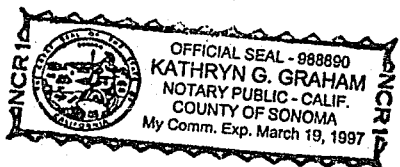
38002

State of **CALIFORNIA**
County of **SONOMA**

On December 9, 1994 before me, Kathryn G. Graham, Notary Public,
DATE

personally appeared Elizabeth Sedemeyer
NAME(S) OF SIGNER(S)

☐ personally known to me - OR - ☐ proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.



WITNESS my hand and official seal.

Kathryn G. Graham

EXPIRATION: 3-19-97

OPTIONAL

Though the data below is not required by law, it may prove valuable to persons relying on the documents and could prevent fraudulent reattachment of this form.

CAPACITY CLAIMED BY SIGNER

- ☐ INDIVIDUAL
- ☐ CORPORATE OFFICER
- ☐ PARTNER(S)
 - ☐ LIMITED
 - ☐ GENERAL
- ☐ ATTORNEY-IN-FACT
- ☐ TRUSTEE(S)
- ☐ GUARDIAN/CONSERVATOR
- ☐ OTHER

TITLES

DESCRIPTION OF ATTACHED DOCUMENT

TITLE OR TYPE OF DOCUMENT

NUMBER OF PAGES

DATE OF DOCUMENT

SIGNER IS REPRESENTING:
NAME OF PERSON(S) OR ENTITY(IES)

SIGNER(S) OTHER THAN NAMED ABOVE

STATE OF OREGON: COUNTY OF KLAMATH: ss.

Filed for record at request of Aspen Title Co the 16th day of Dec A.D., 19 94 at 3:45 o'clock P.M., and duly recorded in Vol. 38000 of Deeds on Page 38000

FEE \$40.00

Evelyn Biehn
By Doreen G. Nollen County Clerk