

K-32058
ESTOPPEL DEED

MORTGAGE OR TRUST DEED

THIS INDENTURE between John Klinepler and Bettie I. Klinepler hereinafter called the first party, and Home Advantage Services, L.L.C. hereinafter called the second party; WITNESSETH:

Whereas, the title to the real property hereinafter described is vested in fee simple in the first party, subject to the lien of a mortgage or trust deed recorded in the mortgage records of the county hereinafter named, in book/reel/ volume No. M96 at page 18571 thereof and/or as the file/instrument/microfilm/reception No. (state which), reference to those records hereby being made, and the notes and indebtedness secured by the mortgage or trust deed are now owned by the second party, on which notes and indebtedness there is now owing and unpaid the sum of \$ 16,390.35, the same being now in default and the mortgage or trust deed being now subject to immediate foreclosure, and whereas the first party, being unable to pay the same, has requested the second party to accept an absolute deed of conveyance of the property in satisfaction of the indebtedness secured by the mortgage and the second party does now accede to that request.

NOW, THEREFORE, for the consideration hereinafter stated (which includes the cancellation of the notes and indebtedness secured by the mortgage or trust deed and the surrender thereof marked "Paid in Full" to the first party), the first party does hereby grant, bargain, sell and convey unto the second party, second party's heirs, successors and assigns, all of the following described real property situated in Klamath County, State of Oregon, to-wit:

Lot 23, Block 1, Tract 1098-Split Rail Ranches, Klamath County, Oregon

together with all of the tenements, hereditaments and appurtenances therunto belonging or in anyway appertaining;

The true and actual consideration for this conveyance is \$ In Lieu of Foreclosure (Here comply with ORS 92.030.)

(CONTINUED ON REVERSE SIDE)

Grantor's Name and Address

Grantee's Name and Address

After recording return to (Name, Address, Zip):

Home Advantage Services, L.L.C.

P.O. Box 7

Bend, OR 97709

Until requested otherwise send all tax statements to (Name, Address, Zip):

SPACE RESERVED
FOR
RECORDER'S USE

STATE OF OREGON,

County of } ss.

I certify that the within instrument was received for record on the day of 19 at o'clock M., and recorded in book/reel/volume No. on page and/or as the file/instrument/microfilm/reception No. Record of Deeds of said County.

Witness my hand and seal of County affixed.

NAME

TITLE

By Deputy

98 MAR 30 AM 10:06

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40-20

10064

TO HAVE AND TO HOLD the same unto the second party, second party's heirs, successors and assigns forever. And the first party, for first party and first party's heirs and legal representatives, does covenant to and with the second party, second party's heirs, successors and assigns, that the first party is lawfully seized in fee simple of the property, free and clear of incumbrances except the mortgage or trust deed and further except None

that the first party will warrant and forever defend the above granted premises, and every part and parcel thereof against the lawful claims and demands of all persons who-soever, other than the liens above expressly excepted; that this deed is intended as a conveyance, absolute in legal effect as well as in form, of the title to the premises to the second party and all redemption rights which the first party may have therein, and not as a mortgage, trust deed or security of any kind; that possession of the premises hereby is surrendered and delivered to the second party; that in executing this deed the first party is not acting under any misapprehension as to the effect thereof or under any duress, undue influence, or misrepresentation by the second party or second party's representatives, agents or attorneys; that this deed is not given as a preference over other creditors of the first party and that at this time there is no person, co-partnership or corporation, other than the second party, interested in the premises directly or indirectly, in any manner whatsoever, except as set forth above.

In construing this instrument, it is understood and agreed that the first party as well as the second party may be more than one person; that if the context so requires the singular pronoun includes the plural and that all grammatical changes shall be made, assumed and implied to make the provisions hereof apply equally to corporations and to individuals.

IN WITNESS WHEREOF, the first party above named has executed this instrument; if first party is a corporation, it has caused its name to be signed and its seal, if any, affixed by an officer or other person duly authorized to do so by order of its board of directors.

Dated _____, 19__

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 FEED 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 OFFERED IN ORS 30930

X John Klinepiper
X Bettie I. Klinepiper
Bettie I. Klinepiper

STATE OF OREGON, County of Marion

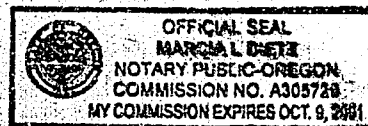
This instrument was acknowledged before me on March 10, 1998, by Bettie I. Klinepiper

This instrument was acknowledged before me on March 10, 1998, by Marcia L. Dietz

as Manager of U.S. Bank - South Salem Branch

Marcia Dietz

My commission expires 10-09-01 Notary Public for Oregon



10065

TYPE OR
PRINT IN
PERMANENT
BLACK INK

229427
LD, TAG NO.

OREGON DEPARTMENT OF HUMAN RESOURCES
HEALTH DIVISION
CENTER FOR HEALTH STATISTICS
CERTIFICATE OF DEATH

Local File Number: 52

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DECLINANT NAME: John KLINEPIER
DATE OF DEATH: January 3, 1997
LOCAL SECURITY NUMBER: 470-36-7185
DATE OF BIRTH: January 16, 1936
PLACE OF BIRTH: Fairbanks, Alaska
FACILITY NAME: Salem Hospital
CITY, TOWN, OR LOCATION OF DEATH: Salem
COUNTY OF DEATH: Marion
DECEDENT'S USUAL OCCUPATION: Staff Sergeant
KIND OF BUSINESS/INDUSTRY: United States Air Force
MARITAL STATUS: Married
SPOUSE: Bettie
RESIDENCE - STATE: Oregon
COUNTY: Marion
CITY, TOWN OR LOCATION: Salem
STREET AND NUMBER: 520 Howard Street SE
INVESTIGATOR: Kenneth B. Klinepiers
ELVERTA SLAUNAKER
BETTIE KLINEPIER, Spouse
METHOD OF DEATH: Natural
PLACE OF DEATH: Rostown Memory Gardens
Salem, Oregon
SIGNATURE OF FUNERAL SERVICE PROVIDER: David W. Evans
LICENSE NUMBER: 3633
NAME, ADDRESS AND PHONE OF FACILITY: Hollman Funeral Home
694 Main Street Dallas, Oregon 97338
DATE FILED: JAN 14 1997
DID HOSPITAL REPRESENTATIVE SIGN REGISTRY FOR ANCESTRAL COPY: YES
TO BE COMPLETED BY CERTIFYING PHYSICIAN
TIME OF DEATH: 3:41 AM
DATE SIGNED: 1-9-97
NAME, TITLE, ADDRESS AND PHONE OF CERTIFYING PHYSICIAN: James E. Brink MD, 2020 Capital St NE Salem OR 97303
NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFYING PHYSICIAN: NONE
IMMEDIATE CAUSE: Pneumonia
DUE TO OR AS A CONSEQUENCE OF: Aortic Cerebral Insult
OTHER SIGNIFICANT CONDITIONS: Myocardial Infarction
MANNER OF DEATH: Natural
DATE OF INJURY: NONE
TIME OF INJURY: NONE
PLACE OF INJURY: NONE
LOCATION OF DEATH: Rostown Memory Gardens, Salem, Oregon

DUPLICATE

ORIGINAL-VITAL STATISTICS COPY
THIS IS A TRUE AND EXACT REPRODUCTION OF THE DOCUMENT OFFICIALLY REGISTERED AT THE OFFICE OF THE MARION COUNTY REGISTRAR
DATE ISSUED: JAN 14 1997
RUTH ANDERSON
COUNTY REGISTRAR
MARION COUNTY, OREGON

STATE OF OREGON, COUNTY OF KLAMATH

Filed for record at request of First American Title the 30th day of March A.D., 1998 at 11:06 o'clock A. M., and duly recorded in Vol. M98 of Deeds on Page 10063

FEE \$40.00
20.00 Non-standard
By Bernetha G. Leitch, County Clerk
Kathleen Reed