

NS

LOUIS E. TREHERN  
1668 Melrose Ave  
Chula Vista, CA 92011

Vol M99 Page 39400

D T SERVICE CO., INC.  
c/o Pauline Browning  
HC15, Box 495C  
Hanover, NM 88041

SPACE RESERVED  
FOR  
RECORDER'S USE

State of Oregon, County of Klamath  
Recorded 10/4/99 at  
11:28 A.m.  
In Vol. M99 Page 39400  
Linda Smith,  
County Clerk Fee \$ 35 -

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WARRANTY DEED

KNOW ALL BY THESE PRESENTS that  
LOUIS E. TREHERN  
hereinafter called grantor, for the consideration hereinafter stated, to grantor paid by  
D T SERVICE CO., INC. A NEVADA CORPORATION  
hereinafter called grantee, does hereby grant, bargain, sell and convey unto the grantee and grantee's heirs, successors and assigns,  
that certain real property, with the tenements, hereditaments and appurtenances thereunto belonging or in any way appertaining,  
situated in KLAMATH COUNTY County, State of Oregon, described as follows, to-wit:

LOT 20, BLOCK 37, KLAMATH FOREST ESTATES, 1ST ADDITION

KLAMATH COUNTY, OREGON

(IF SPACE INSUFFICIENT, CONTINUE DESCRIPTION ON REVERSE SIDE)

To Have and to Hold the same unto grantee and grantee's heirs, successors and assigns forever.  
And grantor hereby covenants to and with grantee and grantee's heirs, successors and assigns, that grantor is lawfully seized  
in fee simple of the above granted premises, free from all encumbrances except (if no exceptions, so state):

and that  
grantor will warrant and forever defend the premises and every part and parcel thereof against the lawful claims and demands of all  
persons whomsoever, except those claiming under the above described encumbrances.

The true and actual consideration paid for this transfer, stated in terms of dollars, is \$ 1500.00  
~~xxxxxx consideration to be paid for the above described premises is \$ 1500.00~~  
~~xxxxxx consideration to be paid for the above described premises is \$ 1500.00~~

In construing this deed, where the context so requires, the singular includes the plural, and all grammatical changes shall be  
made so that this deed shall apply equally to corporations and to individuals.

In witness whereof, the grantor has executed this instrument this 28 day of September 1999, if grantor  
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.

THIS INSTRUMENT WILL NOT ALLOW USE OF THE PROPERTY DESCRIBED IN  
THIS INSTRUMENT IN VIOLATION OF APPLICABLE LAND USE LAWS AND REGU-  
LATIONS. BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON  
ACQUIRING FEE TITLE TO THE PROPERTY SHOULD CHECK WITH THE APPRO-  
PRIATE 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.

X Louis E. Trehern

STATE OF OREGON, County of ) ss.

This instrument was acknowledged before me on 19

by This instrument was acknowledged before me on 19

by

as

of

See attached

Notary Public for Oregon

My commission expires

## CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California

County of

SAN Diego

} ss.

On Sep 28, 1999

Date

before me,

Irene FOMBON

Notary Public

Name and Title of Officer (e.g., "Jane Doe, Notary Public")

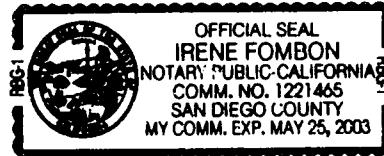
personally appeared

Louis E Trehern

Name(s) of Signer(s)

☐ personally known to me☒ proved to me on the basis of satisfactory evidence

to be the person(~~s~~) whose name(~~s~~) ~~has~~ 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.



Place Notary Seal Above

WITNESS my hand and official seal.

Signature of Notary Public

## OPTIONAL

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

## Description of Attached Document

Title or Type of Document: \_\_\_\_\_

Document Date: \_\_\_\_\_

Number of Pages: \_\_\_\_\_

Signer(s) Other Than Named Above: \_\_\_\_\_

## Capacity(ies) Claimed by Signer

Signer's Name: \_\_\_\_\_

☐ Individual☐ Corporate Officer — Title(s): \_\_\_\_\_☐ Partner — ☐ Limited ☐ General☐ Attorney in Fact☐ Trustee☐ Guardian or Conservator☐ Other: \_\_\_\_\_

Signer Is Representing: \_\_\_\_\_

