

Vol. MQ1 Page 9171

WARRANTY DEED

Escrow NO.:01052482 AFTER RECORDING RETURN TO: MICHAEL D. HARGAN AND JOANNE M. HARGAN 11939 CRYSTAL SPRINGS ROAD KLAMATH FALLS, OR 97603

UNTIL A CHANGE IS REQUESTED ALL TAX STATEMENTS TO THE FOLLOWING ADDRESS: SAME AS ABOVE

SIDNEY E. AINSWORTH AND SAM B. DAVIS, CO-PARTNERS, DOING BUSINESS AS WORTHYDAY INVESTMENTS, hereinafter called GRANTOR(S), convey(s) to MICHAEL D. HARGAN AND JOANNE M. HARGAN, HUSBAND AND WIFE, hereinafter called GRANTEE(S), all that real property situated in the County of Klamath, State of Oregon, described as:

LOT 7, IN BLOCK 9, ORIGINAL TOWN OF KLAMATH FALLS, IN THE COUNTY OF KLAMATH, STATE OF OREGON.

CODE 1.1, MAP 3809-32AB, TAXLOT 11800

"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 30.390."

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 \$150,000.00.

In construing this deed and where the context so requires, the singular includes the plural.

Before me:
Notary Public for
My Commission Expires:

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California)
County of RIVENSIBE	SS.
On HAR 2, 200 / , before me,	Name and Title of Officer (e.g., "Jane Dog Notary Public") B. DAWS Name(s) of Signer(s)
Date SAM	R Name and Title of Officer (e.g., "Jane Dog Notary Public")
personally appeared	Name(s) of Signer(s)
	 □ personally known to me ⋈ proved to me on the basis of satisfactor evidence
NORTON J. GIFFORD Commission # 1272923 Notary Public - Colliamia Rivenide County My Comm. Expires Aug. 5, 2004	to be the person(s) whose name(s) is/ensubscribed to the within instrument an acknowledged to me that he/ehe/they execute the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), the entity upon behalf of which the person(s) acted, executed the instrument.
	WITNESS/my hand and official spal.
Place Notary Seal Above	Signature of Notary Publid
	OPTIONAL —
Though the information below is not required be and could prevent fraudulent remov	by law, it may prove valuable to persons relying on the document all and reattachment of this form to another document.
Description of Attached Document	~
Description of Attached Document Title or Type of Document:	UARRANTY DEED
Document Date: MAR Z, 200	/ Number of Pages:/
Signer(s) Other Than Named Above:	
Capacity(ies) Claimed by Signer Signer's Name:	PAV/S
💢 Individual	Top of thumb her
Corporate Officer — Title(s):	
☐ Partner — ☐ Limited ☐ General	
☐ Attorney in Fact	
☐ Trustee	
☐ Guardian or Conservator	
Other:	

₾ 1999 National Notary Association • 9350 De Soto Ave., P.O. Box 2402 • Chatsworth, CA 91313-2402 • www.nationalnotary.org