

02 APR 16 AM 9:30

22184

Vol M02 Page _____
STATE OF OREGON, _____

1 cc

M&M ENTERPRISES

Grantor's Name and Address

KEVIN MARSH

Grantee's Name and Address

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

KEVIN MARSH

2300 Union
Klamath Falls, OR 97601

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

KEVIN MARSH

2300 Union
Klamath Falls, OR 97601SPACE RESERVED
FOR
RECORDER'S USE

State of Oregon, County of Klamath

Recorded 04/16/2002 9:30 a m.

Vol M02, Pg 22184-85

Linda Smith, County Clerk

Fee \$ 26.00 # of Pgs 2

eputy.

mtc 56787-4

BARGAIN AND SALE DEED

KNOW ALL BY THESE PRESENTS that M&M ENTERPRISES, A PARTNERSHIP CONSISTING OF GARY E. MARSH, KEVIN S. MARSH AND BRYAN D. MARSH, hereinafter called grantor, for the consideration hereinafter stated, does hereby grant, bargain, sell and convey unto KEVIN S. MARSH, hereinafter called grantee, and unto grantee's heirs, successors and assigns, all of that certain real property, with the tenements, hereditaments and appurtenances thereunto belonging or in any way appertaining, situated in KLAMATH County, State of Oregon, described as follows, to-wit:

LOT 8, BLOCK 311 DARROW ADDITION TO THE CITY OF KLAMATH FALLS, ACCORDING TO THE OFFICIAL PLAT THEREOF ON FILE IN THE OFFICE OF THE COUNTY CLERK OF KLAMATH COUNTY, OREGON.

(IF SPACE INSUFFICIENT, CONTINUE DESCRIPTION ON REVERSE)

To Have and to Hold the same unto grantee and grantee's heirs, successors and assigns forever.

The true and actual consideration paid for this transfer, stated in terms of dollars, is \$ -0-. [Ⓢ] However, the actual consideration consists of or includes other property or value given or promised which is ☐ part of the ☒ the whole (indicate which) consideration. [Ⓢ] (The sentence between the symbols [Ⓢ], if not applicable, should be deleted. See ORS 93.030.)

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 on April 12, 2002; 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 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.

GARY E. MARSH

KEVIN S. MARSH

BRYAN D. MARSH

STATE OF OREGON, County of _____) ss.

This instrument was acknowledged before me on APRIL 12, 2002, by Gary E. Marsh

This instrument was acknowledged before me on April 12, 2002, by GARY E. MARSH as PARTNER of M&M ENTERPRISES



Notary Public for Oregon

My commission expires Oct 7, 2005

INDIVIDUAL ACKNOWLEDGMENT

State/Commonwealth of Oregon }
 County of Klamath } ss.

On this the 15 day of April, 2002, before
 me, Lisa Weatherby, the undersigned Notary
Day Month Year
Name of Notary Public

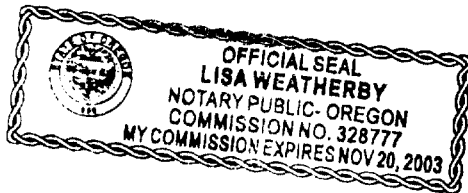
Public, personally appeared Kevin Marsh and Kevin S. Marsh
Partners of m + m Enterprise Name(s) of Signer(s)

☒ 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 for the purposes therein stated.

WITNESS my hand and official seal.



Lisa Weatherby
Signature of Notary Public
Lisa Weatherby
Other Required Information (Printed Name of Notary, Residence, etc.)

Place Notary Seal and/or Any Stamp Above

OPTIONAL

Although the information in this section 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: _____

**Right Thumbprint
of Signer**

Top of thumb here