



Vol M02 Page 31785
STATE OF OREGON, 1 ss

WILLIAM T. JOHNSON
3055 Gold Star Drive
Long Beach, CA 90810
First Party's Name and Address

R. W. & JOYCE SCHATZ
74 Cedar Street
Shady Cove, OR 97539
Second Party's Name and Address

After recording, return to (Name, Address, Zip):
AMERITITLE - MEDFORD OFFICE
1501 E. McAndrews Road
Medford, OR 97504

Until requested otherwise, send all tax statements to (Name, Address, Zip):
R. W. & Joyce Schatz
74 Cedar Street
Shady Cove, OR 97539

SPACE RESERVED
FOR
RECORDER'S USE

State of Oregon, County of Klamath
Recorded 05/30/2002 11:15 a. m.
Vol M02, Pg 31785-86
Linda Smith, County Clerk
Fee \$ 26⁰⁰ # of Pgs 2

eputy.

mtc 56682 -

AFFIANT'S DEED

THIS INDENTURE dated 21st MAY 2002, by and between
WILLIAM T. JOHNSON
the affiant named in the duly filed affidavit concerning the small estate of DELORES Y. WASHINGTON,
deceased, hereinafter called the first party,
and R. W. SCHATZ AND JOYCE SCHATZ, HUSBAND AND WIFE,
hereinafter called the second party; WITNESSETH:

For value received and the consideration hereinafter stated, the first party has granted, bargained, sold and conveyed, and by these presents does grant, bargain, sell and convey unto the second party and second party's heirs, successors and assigns all the estate, right and interest of the estate of the deceased, whether acquired by operation of the law or otherwise, in that certain real property situated in the County of KLAMATH, State of Oregon, described as follows, to-wit:

LOT 1 IN BLOCK 1 OF OREGON SHORES SUBDIVISION - TRACT NO. 1053, ACCORDING TO THE OFFICIAL PLAT THEREOF ON FILE IN THE OFFICE OF THE COUNTY CLERK OF KLAMATH COUNTY, OREGON.

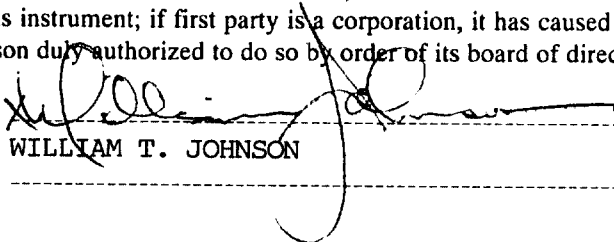
(IF SPACE INSUFFICIENT, CONTINUE DESCRIPTION ON REVERSE)

TO HAVE AND TO HOLD the same unto the second party, and second party's heirs, successors-in-interest and assigns forever.

The true and actual consideration paid for this transfer, stated in terms of dollars, is \$ 5,000.00. 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 WITNESS WHEREOF, the first party 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.

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.


WILLIAM T. JOHNSON

Affiant

STATE OF OREGON, County of _____) ss.

This instrument was acknowledged before me on _____,

by _____,

This instrument was acknowledged before me on _____,

by _____,

as _____,

of _____.

Notary Public for Oregon

My commission expires _____

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT**31786**

State of California

County of Los Angeles

} ss.

On 5-21-02

Date

, before me, GODWIN OGUBIKE AJIH

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

personally appeared WILLIAM T. JOHNSON

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) 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.



Place Notary Seal Above

WITNESS my hand and official seal.

Godwin Ogubike Ajih

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 DocumentTitle or Type of Document: AFFIANT'S DEEDDocument Date: 5/21/02

Number of Pages: _____

Signer(s) Other Than Named Above: SAME**Capacity(ies) Claimed by Signer**Signer's Name: WILLIAM T. JOHNSON☒ Individual☐ Corporate Officer — Title(s): _____☐ Partner — ☐ Limited ☐ General☐ Attorney in Fact☐ Trustee☐ Guardian or Conservator☐ Other: _____Signer Is Representing: SELF**RIGHT THUMBPRINT
OF SIGNER**

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