

AND WHEN RECORDED MAIL THIS DEED AND, UNLESS OTHERWISE SHOWN BELOW, MAIL TAX STATEMENTS TO:

NAME CHERI LYNN TIBBS
 STREET ADDRESS 15609 DELMAR WAY
 CITY PENN VALLEY
 STATE CALIFORNIA
 ZIP 95946

Title Order No. _____ Escrow No. _____

State of Oregon, County of Klamath
 Recorded 08/21/2002 4:27 a.m.
 Vol M02, Pg 47035
 Linda Smith, County Clerk
 Fee \$ 21.00 # of Pgs 1

SPACE ABOVE THIS LINE FOR RECORDER'S USE

GRANT DEED**DOCUMENTARY TRANSFER TAX \$**

- ☐ computed on full value of property conveyed, or
☐ computed on full value less liens and encumbrances remaining at time of sale.

SIGNATURE OF DECLARANT OR AGENT DETERMINING TAX

FIRM NAME

'02 AUG 21 AM 9:27

FOR VALUABLE CONSIDERATION, receipt of which is acknowledged, I (We) BEATRICE GRACE CUMMINS

(NAME OF GRANTOR(S))

grant to

CHERI LYNN TIBBS

(NAME OF GRANTEE)

all that real property situated in the City of SPRAGUE RIVER VALLEY ACRES (or in an unincorporated area of) KIAMATH FALLS County, State of OREGON, described as follows (insert legal description):

SPRAGUE RIVER VALLEY ACRES BLOCK 13 - LOT 14
MAP: R 3612-001B0-05900-000 CODE: 221.

Assessor's parcel No. _____

Executed on _____, at _____

(CITY AND STATE)

STATE OF California
 COUNTY OF Los Angeles

Beatrice Grace CumminsOn 05-19-02 before me, John K. Cho, Notary Public

personally appeared Beatrice Grace Cummins
CUMMINS

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 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.

WITNESS my hand and official seal.

RIGHT THUMBPRINT (Optional)

TOP OF THUMB HERE

**CAPACITY CLAIMED BY SIGNER(S)**

- ☐ INDIVIDUAL(S)
☐ CORPORATE

OFFICERS

- ☐ PARTNER(S) ☐ LIMITED (TITLES)
☐ ATTORNEY IN FACT ☐ GENERAL
☐ TRUSTEE(S)
☐ GUARDIAN/CONSERVATOR
☐ OTHER

SIGNER IS REPRESENTING:
 (NAME OF PERSON(S) OR ENTITY(IES)):

Self

MAIL TAX STATEMENT TO: CHERI LYNN TIBBS
15609 DELMAR WAY, PENN VALLEY, CAL 95946

Before you use this form, fill in all blanks, and make whatever changes are appropriate and necessary to your particular transaction. Consult a lawyer if you doubt the form's fitness for your purpose and use. Wolcotts makes no representation or warranty, express or implied, with respect to the merchantability or fitness of this form for an intended use or purpose.

