State of Oregon, County of Klamath

THIS SPACE Recorded 02/06/2003 3:06 p. m.

Vol M03 Pg 07529 30 Linda Smith, County Clerk Fee \$ 2600 # of Pgs 3



'03 FEB 6 PM3:06

After recording return to: ERIK FAIRCHILD PEDERSEN

250 DELTA STREET

KLAMATH FALLS, OR 97601

Until a change is requested all tax statements shall be sent to The following address:

ERIK FAIRCHILD PEDERSEN

250 DELTA STREET

KLAMATH FALLS, OR 97601

Escrow No.

MT58841-TM

WARRANTY DEED

TOMAS PEDERSEN AND PARRELL PEDERSEN AS TENANTS BY THE ENTIRETY AS TO AN UNDIVIDED ONE-HALF INTEREST AND THEODORE ABRAM AND SUZANNE ABRAM AS TENANTS BY THE ENTIRETY AS TO AN UNDIVIDED ONE-HALF INTEREST., Grantor(s) hereby grant, bargain, sell, warrant and convey to:

ERIK FAIRCHILD PEDERSEN, Grantee(s) and grantee's heirs, successors and assigns the following described real property, free of encumbrances except as specifically set forth herein in the County of KLAMATH and State of Oregon, to wit:

Lots 1 and 3 in Block 115, BUENA VISTA 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.

SUBJECT TO: all those items of record and those apparent upon the land, if any, as of the date of this deed and those shown below, if any:

and the grantor will warrant and forever defend the said 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 for this conveyance is \$30,000.00.

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.

Dated this day of Thuaw, 2003
TOMAS DEDERSEN

PARELL PEDERSEN

THEODORE ABRAM

SUŽANNE ABRAM

State of Oregon County of KLAMATH

anne

OFFICIAL SEAL
TAMARA L MC DANIEL
NOTARY PUBLIC- OREGON
COMMISSION NO. 351161
MY COMMISSION EXPIRES DEC 17, 2005 ()

(Notary Public for Pregon)

My commission expires

| State/Commonwealth of Cregor County of Klandh Ss. County of Klandh Ss. On this the 5 day of Learney Public the undersigned Notary Public, personally appeared to me on the basis of satisfactor evidence To personally known to me - OR - Aproved to me on the basis of satisfactor evidence to be the person(s) whose name(s) is/ar subscribed to the within instrument, an acknowledged to me that he/she/the executed the same for the purposes therein stated. WITNESS my hand and official seal. WITNESS my hand and official seal. WITNESS my hand and official seal. Place Notary Seal and/or Any Stamp Above 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 Right Thumbpric of Signer. | IDUAL ACKNOWLEDGMENT | | 075 30 |
|--|---|---|--|
| me, Name of Notary Public, personally appeared OMOS Public, personally appeared OMOS Public, personally appeared OMOS Public, personally known to me - OR - Name(s) of Signer(s) personally known to me - OR - Aproved to me on the basis of satisfactor evidence to be the person(s) whose name(s) is/ar subscribed to the within instrument, an acknowledged to me that he/she/the executed the same for the purposes therei stated. WITNESS my hand and official seal. WITNESS my hand and official seal. WITNESS my hand and official seal. Other Required Information (Printed Name of Notary, Residence, etc. Other Required Information (Printed Name of Notary, Residence, etc. Other Required 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. OPTIONAL Top of thumb here of the persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document. OPTIONAL Top of thumb here of the persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document. OPTIONAL Description of Attached Document OPTIONAL OP | State/Commonwealth of Oregon |) —) | |
| Name(s) of Signer(s) personally known to me OR Xproved to me on the basis of satisfactor evidence to be the person(s) whose name(s) is/ar subscribed to the within instrument, an acknowledged to me that he/she/the executed the same for the purposes therei stated. NOTALY PUBLIC- OREGON NY COMMISSION BY INTESS DEC 17, 2005 WITNESS my hand and official seal. WITNESS my hand and official seal. WITNESS my hand and official seal. 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: Number of Pages: | me, Iamara L. Name of Notary | y Public . | $\tilde{\mathcal{O}}$ |
| to be the person(s) whose name(s) is/ar subscribed to the within instrument, an acknowledged to me that he/she/the executed the same for the purposes there is tated. NOTARY L MC DANIEL NOTARY PUBLIC OREGON COMMISSION NO. 351161 NY COMMISSION EXPIRES DEC 17, 2005 WITNESS my hand and official seal. WITNESS my hand and official seal. WITNESS my hand and official seal. Place Notary Seal and/or Any Stamp Above Place Notary Seal and/or Any Stamp Above 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 realtachment of this form to another document. Description of Attached Document Title or Type of Document: Was an acknowledged to the within instrument, an acknowledged to the within instrument, an acknowledged to me that he/she/the executed the same for the purposes thereis stated. WITNESS my hand and official seal. Place Notary Seal and/or Any Stamp Above 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 realtachment of Signer Top of thumb here. Description of Attached Document Title or Type of Document: Was an acknowledged to me that he/she/the executed the same for the purposes thereis stated. WITNESS my hand and official seal. WITNESS my hand and official seal. WITNESS my hand and official seal. Right Thumbpring of Signer Top of thumb here | Public, personally appeared 101110 | Name(s) of Signer(s) □ personally known to me | OR |
| 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: 1-30-03 Number of Pages: | OFFICIAL SEAL TAMARA L MC DANIEL NOTARY PUBLIC- OREGON COMMISSION NO. 351161 MY COMMISSION EXPIRES DEC 17, 2005 | subscribed to the within acknowledged to me executed the same for the stated. WITNESS my hand and of Signature of Nota Tomara L. N | instrument, and that he/she/they e purposes therein official seal. |
| 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: 1-30-03 Number of Pages: | Place Notary Seal and/or Any Stamp Ab | oove | |
| 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: Warrant Decl Document Date: 1-30-03 Number of Pages: | | | |
| Document Date: 1-30-03 Number of Pages: | persons relying on the document and could pre of this form to another document. | event fraudulent removal and reattachmen | Right I humbprint of Signer Top of thumb here |
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| Signer(s) Other Than Named Above: Incodore Horamy | | | - |
| 1179 nne Marce no | Signer(s) Other Than Named Above: | Theodore Horam | 4 |
| | | Suranne Abram | |