

03 OCT 17 PM 2:25

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First Party's Name and Address

Second Party's Name and Address

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

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

SPACE RESERVED
FOR
RECORDER'S USE

State of Oregon, County of Klamath
Recorded 10/17/03 2:25 p m
Vol M03 Pg 77425-26
Linda Smith, County Clerk
Fee \$ 26.00 # of Pgs 2

ixed.

puty.

AFFIANT'S DEED Att 5811

THIS INDENTURE dated October 15, 2003

Linda Kathleen Casserly Hill

, by and between

the affiant named in the duly filed affidavit concerning the small estate of Paul Thomas Casserly

, deceased, hereinafter called the first party,
and Linda K. Hill, Mary A. Hill, and Bonita J. Mosquera

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 29, Block 3, RIVERVIEW ADDITION IN THE CITY OF KLAMATH FALLS, according to the official plat thereof on file in the office of the 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 \$ TO CONVEY TITLE. 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 ^o, 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.

Linda Kathleen Casserly Hill
Linda Kathleen Casserly Hill

Affiant

CALIFORNIA

STATE OF ~~OREGON~~ County of KINGS

This instrument was acknowledged before me on 10/16/03
by LINDA KATHLEEN CASSELY HILL

This instrument was acknowledged before me on 10/16/03
by LINDA KATHLEEN CASSELY HILL

as
of

SEE ATTACHED

Michelle [Signature]
Notary Public for CALIFORNIA
My commission expires 08/19/06

26 *

State of CALIFORNIA
 County of KINGS

On 10/10/03 before me, DANIELLE CHRISTINE NELSON
(DATE) NAME/TITLE OF OFFICER-I.e. "JANE DOE, NOTARY PUBLIC"
 personally appeared LINDA KATHLEEN CASSELU
NAME(S) OF SIGNER(S)
Hill

☐ 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.

(SEAL)

Danielle Christine Nelson
(SIGNATURE OF NOTARY)

ATTENTION NOTARY

The information requested below and in the column to the right is **OPTIONAL**. Recording of this document is not required by law and is also optional. It could, however, prevent fraudulent attachment of this certificate to any unauthorized document.

THIS CERTIFICATE
 MUST BE ATTACHED
 TO THE DOCUMENT
 DESCRIBED AT RIGHT:

Title or Type of Document

AFFIDANT'S DEED

Number of Pages

1

Date of Document

10/10/03

Signer(s) Other Than Named Above _____

RIGHT THUMBPRINT (Optional)

TOP OF THUMB HERE

CAPACITY CLAIMED BY SIGNER(S)

☐ INDIVIDUAL(S)

☐ CORPORATE _____

OFFICER(S) _____

(TITLE)

☐ PARTNER(S) ☐ LIMITED

☐ GENERAL

☐ ATTORNEY IN FACT

☐ TRUSTEE(S)

☐ GUARDIAN/CONSERVATOR

☐ OTHER: _____

SIGNER IS REPRESENTING:

(Name of Person(s) or Entity(ies))

RIGHT THUMBPRINT (Optional)

TOP OF THUMB HERE

CAPACITY CLAIMED BY SIGNER(S)

☐ INDIVIDUAL(S)

☐ CORPORATE _____

OFFICER(S) _____

(TITLE)

☐ PARTNER(S) ☐ LIMITED

☐ GENERAL

☐ ATTORNEY IN FACT

☐ TRUSTEE(S)

☐ GUARDIAN/CONSERVATOR

☐ OTHER: _____

SIGNER IS REPRESENTING:

(Name of Person(s) or Entity(ies))