

MX-64223 TM

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THIS SPACE RESERVED FOR RECORDER'S USE

After recording return to: REFUGIO HERNANDEZ PO BOX 464 MERRILL, OR 97632  Until a change is requested all tax statements shall be sent to The following address:  REFUGIO HERNANDEZ PO BOX 464 MERRILL, OR 97632  Escrow No. MT64223-TM	State of Oregon, County of Klamath Recorded 03/08/2004 3:1\ p m Vol M04 Pg \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
STATUTORY WARRANTY DEED  JOHN ALLEN MACFARLANE, SUCCESSOR TRUSTEE OF THE PAMELA E. MACFARLANE LIVING TRUST, UNDER DECLARATION OF TRUST DATED JUNE 2, 1994, Grantor(s) hereby convey and warrant to REFUGIO HERNANDEZ and MARTHA COBIAN DE HERNANDEZ, as tenants by the entirety, Grantee(s) the following described real property in the County of KLAMATH and State of Oregon, free of encumbrances except as specifically set forth herein:	
Lot 7, of LOST RIVER COURT ADDITION TO MERRILL OREGON, according to the official plat thereof on file in the office of the County Clerk of Klamath County, Oregon.	
Tax Account No: 4110-011AB-	00500-000 Key No: 122414
The above-described property is free of encumbrances except all those items of record, if any, as of the date of this deed and those shown below, if any:  The true and actual consideration for this conveyance is \$23,500.00.  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	
BAMELA E MACFARLANE LIVING TRUST BY:	
STATE OF CALIFORNIA }  COUNTY OF COSTA }  SS.	
On MARCH / , 2004 before me, E.P. SPANDAL personally appeared JOHN ALLEN MACFARLANE, SUCCESSOR TRUSTEE OF THE PAMELA E. MACFARLANE LIVING TRUST 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 executed the same in his authorized capacity(ics), and that by his signatures(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.	

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El Spanda