Vol<u>MO4</u> Page 67912

Recorded 10/06/04

Fee \$ 24

Vol M04 Pg<u> 67**年**2 - 1</u>3 Linda Smith, County Clerk

State of Oregon, County of Klamath

\_# of Pgs \_

After recording return to Joyce Yarber P.O. Box 743 Gilchrist, OR. 97737

Tax Statements shall be sent to:

SAME AS ABOVE

Title No. 54686sh Escrow No. 54686sh

WARRANTY DEED - STATUTORY FORM

Donald Leslie Ringen, Trustee and Edna Lou Ringen, Trustee of The Ringen Family Trust, dated 8/28/1992, Grantor,

conveys and warrants to:

Joyce E. Yarber, Grantee

the following described real property free of encumbrances except as specifically set forth herein:

Lot 23, Tract No. 1318, GILCHRIST TOWNSITE, according to the official plat thereof on file in the office of the Clerk of Klammath County, Oregon.

THIS PROPERTY IS FREE OF LIENS AND ENCUMBRANCES, EXCEPT:
ALL THOSE ITEMS OF RECORD, AS OF THE DATE OF THIS DEED, INCLUDING EASEMENTS,
COVENANTS, CONDITIONS AND RESTRICTIONS OF RECORD, IF ANY, INCLUDING ANY
REAL PROPERTY TAXES DUE, BUT NOT YET PAYABLE.

Serial No: R881474

Map No: R-2409-019DD-03200-000

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.

The true consideration for this conveyance is \$80,700.00 (which is paid to an accommodator pursuant to an IRC 1031).

If grantor is a corporation, this has been signed by authority of the Board of Directors.

Dated this 5th day of October, 2004.

THE RINGEN FAMILY TRUST, DATED 8/28/1992

Donald Leslie Ringen, Trustee TRUST EL Edna

Edna Lou Ringen, Trustee

All A

## **CALIFORNIA ALL-PURPOSE ACKNOWLEDGEMENT** STATE OF California COUNTY OF NOVADA before me, Carolyn M. Cozad on October 5,2004 personally appeared Donald Leslie Ringen and Edna Low Ringen 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. CAROLYN M. COZAD WITNESS my hand and official seal. COMM. 1289544 Notary Public-California Signature **NEVADA COUNTY** My Comm. Exp. Jan. 6, 2005 This area for official notarial seal. **OPTIONAL SECTION CAPACITY CLAIMED BY SIGNER** Though statute does not require the Notary to fill in the data below, doing so may prove invaluable to persons relying on the documents. M INDIVIDUAL CORPORATE OFFICER(S) TITLE(S) PARTNER(S) LIMITED GENERAL ATTORNEY-IN-FACT TRUSTEE(S) GUARDIAN/CONSERVATOR OTHER SIGNER IS REPRESENTING: Name of Person or Entity Name of Person or Entity **OPTIONAL SECTION**

Though the data requested here is not required by law, it could prevent fraudulent reattachment of this form.

## THIS CERTIFICATE MUST BE ATTACHED TO THE DOCUMENT DESCRIBED BELOW

TITLE OR TYPE OF DOCUMENT:	Warranty Deed
NUMBER OF PAGES	DATE OF DOCUMENT 10/5/04
SIGNER(S) OTHER THAN NAMED ABOVE	

Reproduced by First American Title Insurance 1/2001