

NN

05 MAY 20 AM 10:00



PAULA PONZO
Box Box 1027
Pellrock Pines, Calif. 95726

First Party's Name and Address

PAULA PONZO
P.O. Box 1027
Pellrock Pines, Calif. 95726

Second Party's Name and Address

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

PAULA PONZO
P.O. Box 1027
Pellrock Pines, Calif. 95726

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

PAULA PONZO
P.O. Box 1027
Pellrock Pines, Calif. 95726

Vol M05 Page 36888

State of Oregon, County of Klamath

Recorded 05/20/05 10:09 a m

Vol M05 Pg 36888-89

Linda Smith, County Clerk

Fee \$ 21.00 # of Pgs 2

ixed.

puty.

AFFIANT'S DEED

THIS INDENTURE dated MAY 5 - 2005

PAULA PONZO

, by and between

the affiant named in the duly filed affidavit concerning the small estate of CLARENCE G. PONZO

, deceased, hereinafter called the first party,

and PAULA PONZO

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 9, Block 15 Oregon Pines

(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 \$ CONVEYANCE OF 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.

Paula Ponzo

Affiant

STATE OF OREGON, County of) ss.

This instrument was acknowledged before me on

by

This instrument was acknowledged before me on

by

as

of

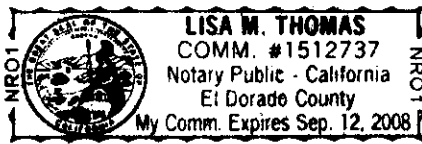
See attached

Notary Public for Oregon

My commission expires

State of California
 County of El Dorado
 On May 16th, 2005 before me, Lisa M. Thomas, N.P.
Date Name and Title of Officer (e.g., "Jane Doe, Notary Public")
 personally appeared Paula Ronzo
Name(s) of Signer(s)

☐ 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.

Lisa M. Thomas
Signature of Notary Public

OPTIONAL

Though the information below 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: Affiant's Deed

Document Date: _____ Number of Pages: _____

Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: _____

- ☐ Individual
☐ Corporate Officer
 Title(s): _____
☐ Partner — ☐ Limited ☐ General
☐ Attorney-in-Fact
☐ Trustee
☐ Guardian or Conservator
☐ Other: _____

Signer Is Representing: _____

**RIGHT THUMBPRINT
OF SIGNER**
 Top of thumb here

Signer's Name: _____

- ☐ Individual
☐ Corporate Officer
 Title(s): _____
☐ Partner — ☐ Limited ☐ General
☐ Attorney-in-Fact
☐ Trustee
☐ Guardian or Conservator
☐ Other: _____

Signer Is Representing: _____

**RIGHT THUMBPRINT
OF SIGNER**
 Top of thumb here