

RE: Lucinda Alexander  
PO BOX 1741  
La Pine OR 97739

Vol M05 Page 57908

WARRANTY DEED

05 JUL 27 AM 9:29

**THIS WARRANTY DEED executed this 2<sup>nd</sup> day of June, 2005**

by First party ADAM ANTHONY KOMPERDA & MINNIE LEE KOMPERDA  
Whom address is 61246 Love Road, Cove OR. 97824,

To Second Party LUCINDA ALEXANDER, Whose address is:  
6053 Rosa Lane, Lapine OR 97739.

**WITNESSTH**, That the said first party, for good consideration and hereby remise, release and quitclaim unto the said second party forever, all the right title, interest and claim which the said first party has in and to the following described parcels of land. The following described land in: KLAMATH County, state of OREGON, to wit:

Parcel #1 1.03 Acres - The Easterly 30 ft. of the N2 of the S2 of the NW4 of the SW4 Section 16 twsp 23 Range 10.

Parcel #2 .21 Acres - E. 30 ft. into of the S2 of the NW4 of the SW4 Section 16 twsp 23 Range 10.

Parcel #1: 1.03 Acres, Tax code # R136481, Map Lot # 2300.  
Parcel #2: .21 Acres, Tax Code # R136542, Map Lot # 2400.

This as recorded in Klamath County Records Office, Klamath Falls, Oregon USA, being the same property conveyed to the first party, under the same name of Adam and Minnie Komperda.

NOTARY

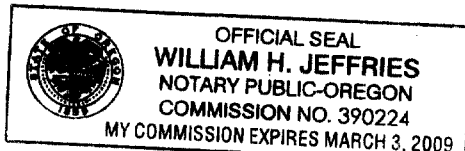
Dated 6-2-05

Adam Anthony Komperda  
Adam Anthony Komperda

Dated 6-2-05

Minnie Lee Komperda  
Minnie Lee Komperda

PLEASE SEE ALL PURPOSE ACKNOWLEDGMENT  
WJ



State of Oregon, County of Klamath  
Recorded 07/27/05 9:29 AM  
Vol M05 Pg 57908-09  
Linda Smith, County Clerk  
Fee \$ 26.00 # of Pgs 2

26 ✓

57909

# All-purpose Acknowledgment

WELLS  
FARGO

STATE OF OREGON, COUNTY OF UNION

On 6/2/2005 before me, the undersigned, a Notary Public  
in and for said State, personally appeared

ADAM ANTHONY KOMPERDA, MINNIE LEE KOMPERDA

☒ 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.

Signature

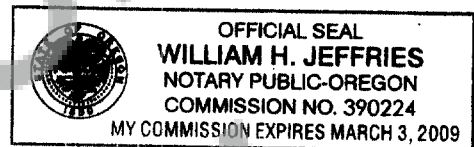
[Signature]

Name (type or printed)

William H. Jeffries

My commission expires:

3/3/2009



(Seal)