mTC-708844



After recording return to: RANDOLPH DAVID P. O. BOX 421 CHILOQUIN, OR 97624 Until a change is requested all tax statements shall be sent to The following address: RANDOLPH DAVID P. O. BOX 421 CHILOQUIN, OR 97624 Escrow No. MT70884-LW Title No. 0070884

State Of Oregon, County Of Klamath M05-61568 08/09/2005 02:50:15 PM # Of Pages 1 Fee: \$41.00

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M05-67126

Klamath County, Oregon 10/21/2005 02:50:39 PM Pages 1 Fee: \$41.00

STATUTORY WARRANTY DEED

BARBARA SIMI, SUCCESSOR TRUSTEE OF DAVID/MARES LIVING TRUST, DATED MAY 27, 2004, Grantor(s) hereby convey and warrant to RANDOLPH DAVID AND LINDA M. DAVID, 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 1,* CHILOQUIN DRIVE ADDITION to the City of Chiloguin, according to the official plat thereof on file in the office of the County Clerk of Klamath County, Oregon.

Tax Account No:

3507-003AA-01800-

rerecording to correct legal

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 \$5,500.00.

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

/RUBEN DAVID RUBEN MARES, TRUSTEE OF DAVID/MARES LIVING TRUST, DATED MAY 27, 2004

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BARBARA SIMI, SUCCESSOR TRUSTEE

STATE OF CALIFORNIA

COUNTY OF CONTYON Costa

On ACUST 67, 2005 before me, ACUM SCW personally appeared DAVID RUBEN MARES, TRUSTEE OF DAVID MARES LIVING TRUST, DATED MAY 27, 2004 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 SHE executed the same in her authorized capacity(ies), and that by her 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

Signature 1 My commission expires

