

Escrow No.

Title No.

## After recording return to: MERLE WEST MEDICAL CENTER, INC., an Oregon Public Benefit Corporation 2865 Daggett Street Klamath Falls, OR 97601 Until a change is requested all tax statements shall be sent to The following address: MERLE WEST MEDICAL CENTER, INC., an Oregon Public Benefit Corporation 2865 Daggett Street Klamath Falls, OR 97601

MT72488-KR

0072488

## M05-69294

Klamath County, Oregon 11/17/2005 02:50:35 PM Pages 2 Fee: \$26.00

## STATUTORY WARRANTY DEED

AMSTUTZ LIMITED LIABILITY COMPANY, Grantor(s) hereby convey and warrant to MERLE WEST MEDICAL CENTER, INC., an Oregon Public Benefit Corporation, 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, Block 5, TRACT NO. 1163, CAMPUS VIEW, according to the official plat thereof on file in the office of the County Clerk of Klamath County, Oregon.

Tax Account No: 3809-020BD-01700-000

Key No:

169203

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 \$450,000.00.

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.

AMSTUTAL MITTED LIABILITY COMPANY

BY

LEZINE / SMITH-AMSTUTZ, Restered Agent

On this lo day of Overnor County of Ktamath

On this lo day of Overnor County appeared LEZLIE C. SMITH-AMSTUTZ as Manager of AMSTUTZ LIMITED LIABILITY COMPANY a Limited Liability Company, known to me to be the person whose name is subscribed to the foregoing instrument, and acknowledged to me that he executed the same in such capacity.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, the day and year in this instrument first above written.

Notary Public for Residing at: 300 Vansery St.

a/0/0

Commission Expires: March 14, 2009