M05-70492

Klamath County, Oregon 12/06/2005 11:31:08 AM Fee: \$26.00 Pages 2

After Recording Return to:

STEVE D. WALKER and SHAWNA R. WALKER

5816 Independence lamath Falls, Or. Until a change is requested all tax statements

Shall be sent to the following address:

STEVE D. WALKER and SHAWNA R. WALKER

Same As Above

WARRANTY DEED

(INDIVIDUAL)

KELLY J. OLIVER, herein called grantor, convey(s) to STEVE D. WALKER and SHAWNA R. WALKER, HUSBAND AND WIFE all that real property situated in the County of KLAMATH, State of Oregon, described as:

Lot 1, Block 5, SECOND ADDITION TO VALLEY VIEW, according to the official plat thereof on file in the office of the Clerk of Klamath County, Oregon.

CODE 041 MAP 3909-012BB TL 02800 KEY# 560510

and covenant(s) that grantor is the owner of the above described property free of all encumbrances except covenants, conditions, restrictions, reservations, rights, rights of way and easements of record, if any, and apparent upon the land, contracts and/or liens for irrigation and/or drainage

and will warrant and defend the same against all persons who may lawfully claim the same, except as shown above.

The true and actual consideration for this transfer is \$186,000.00. (here comply with the requirements of ORS 93.930)

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.

KELLY J. OI

STATE OF OREGON, County of Klamath) ss.

personally appeared the above named KELLY J. OLIVER and acknowledged the foregoing oluntary act and deed. 12-02-05 instrument to be Their/his/her voluntary act and deed.

This document is filed at the request of:

ASPEN TITLE & ESCROW ESCROW, INC

525 Main Street Klamath Falls, OR 97601 Order No.: 00062626

Before me: Notary Public for Oregon My commission expires:

Official Seal

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\$ 36. K

CALIFORNIA ALL-PURPOSE ACKNOWLEDGEMENT	
State of California County of Riverside	
County of Riversed	
On 12-02-05 before me, M. (Contrero
personally appeared - Kelly 5- Oliver Name and Title of Officer (e.g., "Jane Doe, Notary Public") Name(s) of Signer(s)	
personally known to me -OR- proved to me on the basiname(s) (is/acknowledged his/ber/their assignature(s) of behalf of which me -OR- proved to me on the basiname(s) (is/acknowledged his/ber/their assignature(s) of behalf of which me -OR- proved to me on the basiname(s) (is/acknowledged his/ber/their assignature(s) of behalf of which me -OR- proved to me on the basiname(s) (is/acknowledged his/ber/their assignature(s) of behalf of which me -OR- proved to me on the basiname(s) (is/acknowledged his/ber/their assignature(s) of behalf of which me -OR- proved to me on the basiname(s) (is/acknowledged his/ber/their assignature(s) of behalf of which me -OR- proved to me on the basiname(s) (is/acknowledged his/ber/their assignature(s) of behalf of which me -OR- proved to me on the basiname(s) (is/acknowledged his/ber/their assignature(s) of behalf of which me -OR- proved to me on the basiname(s) (is/acknowledged his/ber/their assignature(s) of behalf of which me -OR- proved to me on the basiname(s) (is/acknowledged his/ber/their assignature(s) of behalf of which me -OR- proved to me on the basiname(s) (is/acknowledged his/ber/their assignature(s) of behalf of which me -OR- proved to me on the basiname(s) (is/acknowledged his/ber/their assignature(s) of behalf of which me -OR- proved to me on the basiname(s) (is/acknowledged his/ber/their assignature(s) of behalf of which me -OR- proved to me on the basiname(s) (is/acknowledged his/ber/their assignature(s) of behalf of which me -OR- proved to me on the basiname(s) (is/acknowledged his/ber/their assignature(s) of behalf of which me -OR- proved to m	
Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent traudulent removal and realtachment of this form to another document Description of Attached Document	
Document Date: (2-2-6)	
	Number of Pages:
Capacity(ies) Claimed by Signer(s)	
Signer's Name: Individual Corporate Officer Titles(s): Partner - Limited General Attorney-in-Fact Trustee Guardian or Conservator Officer Top of Thumb here	Signer's Name: Individual Corporate Officer Title(s): Partner - Limited General Attorney-in-Fact Trustee Guardian or Conservator Officer Officer Officer Officer Top of Thumb here
Signer Is Representing:	Signer Is Representing:
	Name of the state