M06-00780

After Recording Return to:
LIGIA BEATRIZ AMAYA
SOG W Dlive ST.
Inglewood, La. 9030/
Until a change is requested all tax statements
Shall be sent to the following address:
LIGIA BEATRIZ AMAYA
Same as a hove
AE. 62543 MS

Klamath County, Oregon 01/13/2006 03:10:13 PM Pages 3 Fee: \$31.00

WARRANTY DEED (INDIVIDUAL)

WILLIAM S SMITH and MARGARET G SMITH TRUSTEES OF THE SMITH FAMILY REVOCABLE TRUST, herein called grantor, convey(s) to LIGIA BEATRIZ AMAYA, herein called grantee, all that real property situated in the County of KLAMATH, State of Oregon, described as:

Lot 1, Block 3, RIVERVIEW SECOND ADDITION, according to the official plat thereof on file in the office of the Clerk of Klamath County, Oregon.

CODE 004 MAP 3909-005CA TL 00400 KEY# 532819

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 \$100,000.00. (here comply with the requirements of ORS 93.930)

BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON TRANSFERRING FEE TITLE SHOULD INQUIRE ABOUT THE PERSON'S RIGHTS, IF ANY, UNDER CHAPTER 1, OREGON LAWS 2005 (BALLOT MEASURE 37 (2004)). THIS INSTRUMENT DOES 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 AND TO INQUIRE ABOUT THE RIGHTS OF NEIGHBORING PROPERTY OWNERS, IF ANY UNDER CHAPTER 1, OREGON LAWS 2005 (BALLOT MEASURE 37 (2004)).

	THE SMITH FAMILY REVOCABLE T	RUST
	BY: WILLIAM S. SMITH, TRUSTEE	
	Mayarit I. Smill BY: MARGARET G. SMITH, TRUSTE	E S
STATE OF CALIFORNIA, County of PLA		
	ppeared the above named WILLIAM S SMITH and MARQ instrument to be their voluntary act and deed.	GARET (
This document is filed at the request of:		
rts.	Before me:	
an an	Notary Public for California	
TITLE & ESCROW, INC.	My commission expires:	
525 Main Street Klamath Falls, OR 97601	Official Seal	



Order No.: 00062543

Dated January 6, 2006.

STATE OF CALIFORNIA COUNTY OF	} s.s.
On	
Sew Trasporti	
a Notary Public in and for said County and State, personally appeared	

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 sal.



attached tollowranty feed

(This area for official notorial seal)

dated 1-6-200e

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

	\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
State of California)
County of PLACER	ss.
County of TEACET	
- Trainger Inthe 2001	1 - Chlor
On Date before n	ne, Amy Sibly Namy and Title of Officeracy, "Jane Doe, Notary Public")
personally appeared WILLIAM S.	Smith
	Name(s) of Signer(s) personally known to me
	proved to me on the basis of satisfactor
	evidence
	to be the person(s) whose name(s) is/are
£114444	subscribed to the within instrument and
AMY SIBLEY	acknowledged to me that he/she/they executed
COMM. #1388449 NOTARY PUBLIC - CALIFORNIA	the same in his/ her/thei r authorized capacity(ies) , and that by his/ her/thei
PLACER COUNTY	signature(s) on the instrument the person(s), o
My Corren. Expires Jan. 2, 2007	the entity upon behalf of which the person(s
	acted, executed the instrument.
	WITNESS my hand and official seal.
	any Sibley
	Signature of Notary Public
	OPTIONAL
Though the information below is not required by law, it m	or Trouval lay prove valuable to persons relying on the document and could prevent tachment of this form to another document.
Description of Attached Document	machineric of this form to another document.
Title or Type of Document: WAKRANTY	DEELD
Document Date: JANUARY 6th, 20	
· · · · · · · · · · · · · · · · · · ·	
Signer(s) Other Than Named Above:	GARET G. SMITH
Capacity(ies) Claimed by Signer	
Signer's Name: WILLIAM S. SN	1/TH
	RIGHT THUMBPRIN OF SIGNER
Individual	Top of thumb here
☐ Corporate Officer — Title(s): ☐ Partner — ☐ Limited ☐ General	
☐ Attorney-in-Fact	
☐ Trustee	
Guardian or Conservator Other:	
Signer Is Representing:	
e.gor to representing.	