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NO PART OF ANY STEVENS-NESS FORM MAY BE REPRODUCED IN ANY FORM OR BY ANY ELECTRONIC OR MECHANICAL MEANS



Raymond L. & Lynn Lent

612 Biscayne Drive

San Rafael, CA 94901

Grantor's Name and Address

Raymond L. & Lynn Lent, Trustees

Grantee's Name and Address

After recording, return to (Name, Address, Zip):

Raymond L. & Lynn Lent, Trustees
of the Lent 2002 Family Trust, dated
April 24, 2002 612 Biscayne Dr.

Until requested otherwise, send all tax statements to (Name, Address, Zip):

Raymond L. & Lynn Lent
612 Biscayne Drive
San Rafael, CA 94901

M06-02205

Klamath County, Oregon

02/03/2006 02:42:10 PM

Pages 2 Fee: \$26.00

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MTC 1396-7373

BARGAIN AND SALE DEED

KNOW ALL BY THESE PRESENTS that Raymond L. Lent & Lynn G. Lent, as tenants by the entirety

hereinafter called grantor, for the consideration hereinafter stated, does hereby grant, bargain, sell and convey unto Raymond L. Lent & Lynn G. Lent, Trustees of the Lent 2002 Family Trust, dated April 24, 2002

hereinafter called grantee, and unto grantee's heirs, successors and assigns, all of that certain real property, with the tenements, hereditaments and appurtenances thereunto belonging or in any way appertaining, situated in Klamath County, State of Oregon, described as follows, to-wit:

Lot 829 Tract 1404 - Replat of Lots 792 - 795 and 818 - 820 of RUNNING Y RESORT, PHASE 10 - TRACT 1394, according to the official plat thereof on file in the office of the County Clerk of Klamath County Oregon.

AMERITITLE, has recorded this instrument by request as an accommodation only, and has not examined it for regularity and sufficiency or as to its effect upon the title to any real property that may be described therein.

(IF SPACE INSUFFICIENT, CONTINUE DESCRIPTION ON REVERSE)

To Have and to Hold the same unto grantee and grantee's heirs, successors and assigns forever.

The true and actual consideration paid for this transfer, stated in terms of dollars, is \$ -0- ① However, the actual consideration consists of or includes other property or value given or promised which is ☐ part of the ☒ the whole (indicate which) consideration. ① (The sentence between the symbols ①, if not applicable, should be deleted. See ORS 93.030.)

In construing this deed, where the context so requires, the singular includes the plural, and all grammatical changes shall be made so that this deed shall apply equally to corporations and to individuals.

IN WITNESS WHEREOF, the grantor has executed this instrument on 1-27-06; if grantor is a corporation, it has caused its name to be signed and its seal, if any, affixed by an officer or other person duly authorized to do so by order of its board of directors.

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.

Lynn G. Lent
Raymond L. Lent

STATE OF OREGON, County of) ss.

This instrument was acknowledged before me on

by

This instrument was acknowledged before me on

by

as

of

see Attached

Notary Public for Oregon

My commission expires

26.00

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

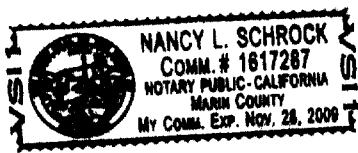
State of California

County of Marin

On January 27, 2006 before me, Nancy Schrock, Notary,
Date Name and Title of Officer (e.g., "Jane Doe, Notary Public")

personally appeared Raymond L. Lent and Lynn G. Lent,
Name(s) of Signer(s)

☒ 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.

Nancy Schrock
Signature of Notary Public

OPTIONAL

Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

Description of Attached Document

Title or Type of Document: _____

Document Date: _____ Number of Pages: _____

Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: _____

- ☐ Individual
☐ Corporate Officer
Title(s): _____
☐ Partner — ☐ Limited ☐ General
☐ Attorney-in-Fact
☐ Trustee
☐ Guardian or Conservator
☐ Other: _____

Signer Is Representing: _____

RIGHT THUMBPRINT
OF SIGNER
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Signer's Name: _____

- ☐ Individual
☐ Corporate Officer
Title(s): _____
☐ Partner — ☐ Limited ☐ General
☐ Attorney-in-Fact
☐ Trustee
☐ Guardian or Conservator
☐ Other: _____

Signer Is Representing: _____

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