	JUN-02-2006 03:09 AMERITITLE KI	FALLS 5418820620 P. 02/02	
JUN-02-2006 03:09 AMERITITLE REFILLS  NO PART OF ANY STEVENSNESS FORM MAY BE REPRODUCED IN ANY FORM OR BY ANY ELECTRONIC OR MECHANICAL MEANS.			
:	:5 I		
	n 1 m. 1 / Bara TP &	1400 40000	
	Delaces Mahal ANN TRY	M06-13029	
		Klamath County, Oregon	
	Welding Town	06/26/2006 01:50:56 PM	
	Thomas R Y DEPHANEA	Pages 2 Fee: \$26.00	
	welding.	IMMIN TELEVITATIONS CONTRACTORS AND	
	Grantee's Name and Address	ŧ	
	After reoprding, return to (Nerse, Address, Zip):	,	
	6912 Hilyard Cli		
	Khamath talls		
	7 / OC 3		
	Until requested otherwise, send all tax statements to (Name, Address, Zip):		
	100 120 × 5126	Dy	
	KLAMUTH FAILS OR 97601		
	AND DO AN	ITY DEED - STATUTORY FORM	
	Delores Mapel ANN TRY	Smith biving trust & welding Tog Grantor,	
	conveys and warrants to	Grantce,	
	Thomas R. of Dephane His We	nees except as specifically set forth herein, situated in	
the following described real property free of encumbrances, except as specifically set forth herein, situated in			
County, Oregon, to-wit: 6912 Hilyard Ct Nhamath FAlls, OR, 97603			
Country Green, BIK13, Lot 11, 7 EM 15036			
COUNTRY GREEN, BIRTS, NO			
(IF SPACE INSUFFICIENT, CONTINUE DESCRIPTION ON REVERSE)			
The property is free from encumbrances, except (if none, so state): NONE			
	·		
	are any acceptantion for this conveyance is \$	(Here, comply with the requirements of ORS 93.030.)	
	The true consideration for this conveyance is desired		
the same and its seal if			
DATED; if a corporate grantor, 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.			
	any, affixed by an officer or other person duly authorit	zed to do so by order or its board of directors.	
BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON TRANSFER- RING 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 APPLIABLE LAND USE LAWS AND REGULA- INSTRUMENT IN VIOLATION OF APPLIABLE AND USE LA			
	BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON RING FEE TITLE SHOULD INQUIRE ABOUT THE PERSON'S RIGHT UNDER CHAPTER 1, OREGON LAWS 2005 (BALLOT MEASURE 37 (INSTRUMENT DOES NOT ALLOW USE OF THE PROPERTY DESCRIBINGTHUMENT IN VIOLATION OF APPLICABLE LAND USE LAWS ALTIONS. BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, TACQUIRING FEE TITLE TO THE PROPERTY SHOULD CHECK WITH PRIATE CITY OR COUNTY PLANNING DEPARTMENT TO VERIFY	2004)). THIS Survey 111. (1. (1. (1. (1. (1. (1. (1. (1. (1	
	INSTRUMENT DOES NOT ALLOW USE OF THE PROPERTY DESCRI	BED IN THIS	
	TIONS REFORE SIGNING OR ACCEPTING THIS INSTRUMENT, T	HE PERSON	
	ACQUIRING FEE TITLE TO THE PROPERTY SHOULD CHECK WITH	APPROVED	
	DIGUTE OF NEIGHBORING PROPERTY OWNERS, IF ANY, UNDER	CHAPTER 1.	
	OREGUN LAWS 2005 (BALLOT MEASONE OF (2004)).	$D = I \cdot A \cdot I \cdot I$	
	STATE OF OREGON, Con	anty of	
	This instrument was acknowledged boloto into on		
$\ $	This instrument was acknowledged before me on		
	by		
	as		
11	OFFICIAL SEAL	· /// (W)	

OFFICIAL SEAL
LINCOLN CORNTHWAITE
NOTARY PUBLIC-OREGON
COMMISSION NO. 399562
MY COMMISSION PUBES NOV. 15, 2009

Notary Public for Oregon My commission expires

## INDIVIDUAL ACKNOWLEDGMENT

Waster Contract Contr	<del>᠐᠅᠐᠙᠐᠙᠐᠙᠐᠙᠐᠙᠐᠙᠐᠙᠐᠙᠐᠙᠐</del>
State/Commonwealth of Oregon County of Hamath	<b>\ \</b> ss.
On this the Day day of Mamp of Notary Public Public, personally appeared  OFFICIAL SEAL KIMBERLY M IDROGO NOTARY PUBLIC-OREGON COMMISSION NO. A397787  MY COMMISSION EXPRES SEP 29, 2009	Name(s) of Signer(s)  Personally known to me OR  Leroved 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 for the purposes therein stated.  WITNESS my hand and official seal.
Place Notary Seal and/or Any Stamp Above	Signature of Notany Polic  Other Required Information (Printed Name of Notany, Residence, etc.)
Although the information in this section is not required persons relying on the document and could prevent fragof this form to another document.  Description of Attached Document  Title or Type of Document:  Document Date:  Document Date:  Signer(s) Other Than Named Above:	of Signer Top of thumb here