



Delores Mabel ANN TR & Smith Living Trust & Welding Tam
 Grantor's Name and Address

Thomas R & DePhane A
Welding

Grantee's Name and Address

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

6912 Hilgard Ct.
Klamath Falls, OR
97603

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

Tom Welding
P.O. Box 5126
Klamath Falls, OR 97601

M06-13029

Klamath County, Oregon

06/26/2006 01:50:56 PM

Pages 2 Fee: \$26.00

2006-016892

Klamath County, Oregon



00001794200600168920030038

08/22/2006 11:54:18 AM

Fee: \$31.00

WARRANTY DEED - STATUTORY FORM

Delores Mabel ANN TR & Smith Living Trust & Welding Tam Grantor,
 conveys and warrants to

Thomas R & DePhane A. Welding Grantee,

the following described real property free of encumbrances, except as specifically set forth herein, situated in

County, Oregon, to-wit:

6912 Hilgard Ct Klamath Falls, OR. 97603

Country Green, BIRK3, Lot 11, # EM 15036

BIRK3 Rerecording to correct legal description
TRW. (IF SPACE INSUFFICIENT, CONTINUE DESCRIPTION ON REVERSE)

The property is free from encumbrances, except (if none, so state): NONE

The true consideration for this conveyance is \$ 60 (Here, comply with the requirements of ORS 93.030.)

DATED 6/5/06

; 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.

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, 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)).

Delores M. A. Smith
X L R Welding
X L R Welding 8-22-06

STATE OF OREGON, County of Deschutes ss.

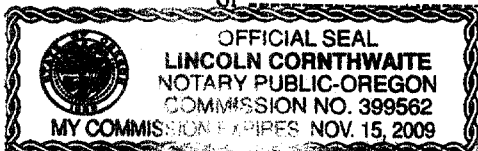
This instrument was acknowledged before me on 6/5/06
 by Delores Smith

This instrument was acknowledged before me on _____

by _____

as _____

of _____



Notary Public for Oregon

My commission expires 11/15/09

INDIVIDUAL ACKNOWLEDGMENT

State/Commonwealth of Oregon
County of Hamath } ss.

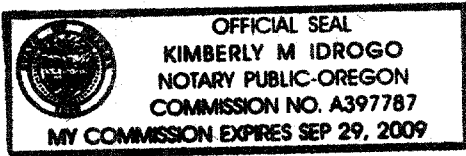
On this the 26 day of June, 2006, before
me, Kimberly M Idrogo, the undersigned Notary
Public, personally appeared Thomas R. Wekling

Name of Notary Public

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 for the purposes therein
stated.

WITNESS my hand and official seal.

Kimberly M Idrogo
Signature of Notary Public

Other Required Information (Printed Name of Notary, Residence, etc.)

Place Notary Seal and/or Any Stamp Above

OPTIONAL

Although the information in this section 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: Warranty Deed

Document Date: 6/5/06 Number of Pages: 1

Signer(s) Other Than Named Above: Delores M. A. Smith

Right Thumbprint
of Signer

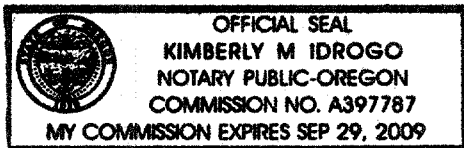
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INDIVIDUAL ACKNOWLEDGMENT

State/Commonwealth of Oregon
County of Clatsop } ss.

On this the 22 day of August, 2006, before
me, Kimberly M Idrogo, the undersigned Notary
Public, personally appeared Tom R. Welding,
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 for the purposes therein
stated.

WITNESS my hand and official seal.

Kimberly M Idrogo
Signature of Notary Public
Kimberly M Idrogo
Other Required Information (Printed Name of Notary, Residence, etc.)

Place Notary Seal and/or Any Stamp Above

OPTIONAL

Although the information in this section 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: Warranty Deed

Document Date: 8/22/06 Number of Pages: 2

Signer(s) Other Than Named Above: Delores M.A. Smith

**Right Thumbprint
of Signer**

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