

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



W V T SERVICE, INC.
HC71, Box 495C % P. Browning
Hanover, NM 88041
Mrs. Tracy J. Matheson
P O Box 767
Lodi, CA 95241
Grantee's Name and Address
After recording, return to (Name, Address, Zip):
Mrs. Tracy J. Matheson
P O Box 767
Lodi, CA 95241
Until requested otherwise, send all tax statements to (Name, Address, Zip):
Mrs. Tracy J. Matheson
P O Box 767
Lodi, Ca 95241

2006-018890
Klamath County, Oregon



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09/20/2006 12:11:43 PM

Fee: \$26.00

WARRANTY DEED

KNOW ALL BY THESE PRESENTS that

W V T SERVICE, INC. A NEVADA CORPORATION
hereinafter called grantor, for the consideration hereinafter stated, to grantor paid by
Tracy J. Matheson And Kristi M. Harris, As Joint Tenants
hereinafter called grantee, does hereby grant, bargain, sell and convey unto the grantee and grantee's heirs, successors and assigns,
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 56, BLOCK 79, KLAMATH FALLS FOREST ESTATES, HIGHWAY 66, PLAT 4

KLAMATH COUNTY, OREGON

(IF SPACE INSUFFICIENT, CONTINUE DESCRIPTION ON REVERSE)

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

And grantor hereby covenants to and with grantee and grantee's heirs, successors and assigns, that grantor is lawfully seized
in fee simple of the above granted premises, free from all encumbrances except (if no exceptions, so state):

and that
grantor will warrant and forever defend the premises and every part and parcel thereof against the lawful claims and demands of all
persons whomsoever, except those claiming under the above described encumbrances.

The true and actual consideration paid for this transfer, stated in terms of dollars, is \$ 8000.00
actual consideration consists of or includes other property or value given or promised which is [] the whole [] part of the (indicate
which) consideration. (The sentence between the symbols [], 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 9-14-06; 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.

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 APPLICABLE LAND USE LAWS AND REGULA-
TIONS. BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON
ACQUIRING FEE TITLE TO THE PROPERTY SHOULD CHECK WITH THE APPRO-
PRIATE CITY OR COUNTY PLANNING DEPARTMENT TO VERIFY APPROVED
USES, TO DETERMINE ANY LIMITS ON LAWSUITS AGAINST FARMING OR FOR-
EST 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)).

STATE OF ~~OREGON~~ ^{California}, County of Orange ss.

This instrument was acknowledged before me on 9-14-06
by William V. Tropp

This instrument was acknowledged before me on 9-14-06
by William V. Tropp

as
of

Notary Public for Oregon CA

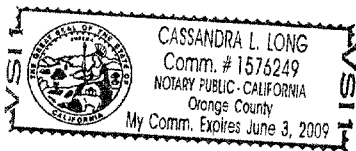
My commission expires 6-3-09

26-F

ALL-PURPOSE ACKNOWLEDGMENT

State of California }
County of Orange } SS.
On 9-14-06 before me, Cassandra L. Long
(DATE) (NOTARY)
personally appeared William V. Tropp
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 signatures(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.
Cassandra L. Long
NOTARY'S SIGNATURE

OPTIONAL INFORMATION

The information below is not required by law. However, it could prevent fraudulent attachment of this acknowledgment to an unauthorized document.

| CAPACITY CLAIMED BY SIGNER (PRINCIPAL) | DESCRIPTION OF ATTACHED DOCUMENT |
|---|----------------------------------|
| <input type="checkbox"/> INDIVIDUAL | TITLE OR TYPE OF DOCUMENT |
| <input type="checkbox"/> CORPORATE OFFICER | NUMBER OF PAGES |
| <input type="checkbox"/> PARTNER(S) | DATE OF DOCUMENT |
| <input type="checkbox"/> ATTORNEY-IN-FACT | OTHER |
| <input type="checkbox"/> TRUSTEE(S) | |
| <input type="checkbox"/> GUARDIAN/CONSERVATOR | |
| <input type="checkbox"/> OTHER: | |

| | | |
|---|----------------------------------|------------------------|
| SIGNER IS REPRESENTING: NAME OF PERSON(S) OR ENTITY(IES) | RIGHT THUMBPRINT OF SIGNER | Top of thumbprint here |
| | | |