## 2006-021463 Klamath County, Oregon



After recording return to: Alan J. Wallace 3530 Pelican Street Klamath Falls, OR 97601

Until a change is requested all tax statements shall be sent to the following address: Alan J. Wallace 3530 Pelican Street Klamath Falls, OR 97601

File No.: 7021-900767 (DMC) Date: October 17, 2006

	THIS SPAC	00007192200600214630030 10/25/2006 11:40:32 AM	036
		10/25/2006 11:40:32 AM	Fee: \$31.00
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## STATUTORY WARRANTY DEED

Forrest E. Harding and Linda B. Harding as trustees of the Harding Trust dated March 4, 1998, Grantor, conveys and warrants to Alan J. Wallace and Carla Puopolo not as tenants in common, but with rights of survivorship, Grantee, the following described real property free of liens and encumbrances, except as specifically set forth herein:

## LOT 6 BLOCK 49 IN TRACT 1184-OREGON SHORES UNIT 2 FIRST ADDITION, ACCORDING TO THE OFFICIAL PLAT THEREOF ON FILE IN THE OFFICE OF THE COUNTY CLERK OF KLAMATH COUNTY, OREGON.

Subject to:

31.-F

1. Covenants, conditions, restrictions and/or easements, if any, affecting title, which may appear in the public record, including those shown on any recorded plat or survey.

The true consideration for this conveyance is **\$21,000.00**. (Here comply with requirements of ORS 93.030)

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Statutory Warranty Deed - continued

File No.: 7021-900767 (DMC) Date: 10/17/2006

BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON TRANSFERRING FEE TITLE SHOULD INQUIRE ABOUT THE PERSON'S RIGHTS, IF ANY, UNDER ORS 197.352. 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 ORS 197.352.

Dated this \_\_\_\_\_\_ day of \_\_\_\_\_\_, 20\_\_\_\_\_,

Forrest E. Harding and Linda B. Harding as trustees of the Harding Trust dated March 4,

1998 Noster Forrest E. Harding, Trustee 14 B d Trustee Linda B. Harding, Trustee

STATE OF	California	)
		)ss.
County of		)

This instrument was acknowledged before me on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, 20\_\_\_\_, by Forrest E. Harding and Linda B. Harding as Trustees of Forrest E. Harding and Linda B. Harding as trustees of the Harding Trust dated March 4, 1998, on behalf of the Harding Trust.

Notary Public for California My commission expires:

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## **CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT**

ALIFORNIA) State of

County of Los ANGELES )

On OCTOBER 192006 before me, JONATHAN NYERGES NOTARY PUBLIC -(here insert name and title of the officer) personally appeared FORREST GLROY HARDING LINDA BURRIS HARDING 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. JONATHAN NYERGES /ITNESS my hand and official seal. COMM. #1509828 Notary Public-California LOS ANGELES COUNTY S My Comm. Exp. Aug 26, 2008 Signature of Notary Public (Seal) ADDITIONAL OPTIONAL INFORMATION INSTRUCTIONS FOR COMPLETING THIS FORM Any acknowledgment completed in California must contain verbiage exactly as DESCRIPTION OF THE ATTACHED DOCUMENT appears above in the notary section or a separate acknowledgment form must be properly completed and attached to that document. The only exception is if a document is to be recorded outside of California. In such instances, any alternative STATUTORY WARAANTY acknowledgment verbiage as may be printed on such a document so long as the verbiage does not require the notary to do something that is illegal for a notary in (Title or description of attached document) California (i.e. certifying the authorized capacity of the signer). Please check the (Title or description of attached document continued) document carefully for proper notarial wording and attach this form if required. State and County information must be the State and County where the document Number of Pages \_\_\_\_\_ Document Date\_ signer(s) personally appeared before the notary public for acknowledgment. Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed. (Additional information) The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public). Print the name(s) of document signer(s) who personally appear at the time of notarization. CAPACITY CLAIMED BY THE SIGNER Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/she/they, is /are ) or circling the correct forms. Failure to correctly indicate this □ Individual (s) information may lead to rejection of document recording. Corporate Officer The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a (Title) sufficient area permits, otherwise complete a different acknowledgment form.  $\Box$  Partner(s) Signature of the notary public must match the signature on file with the office of the county clerk.  $\Box$  Attorney-in-Fact Additional information is not required but could help to ensure this \*\*  $\Box$  Trustee(s) acknowledgment is not misused or attached to a different document. Other\_ Indicate title or type of attached document, number of pages and date. Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary). ÷ Securely attach this document to the signed document

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