RECORDING REQUESTED BY

Craig White P.O. Box 134 Lone Pine, Ca. 93545

AND WHEN RECORDED MAIL TO

TAX STATEMENT IS TO BE MAILED TO

Craig White P.O. Box 134 Lone Pine, Ca. 93545 2007-002007

Klamath County, Oregon



0001445620070002007002

02/06/2007 08:25:56 AM

Fee: \$26.00

SPACE ABOVE THIS LINE FOR RECORDER'S USE

	BARGAIN	AND	SALE	DEED
	3			March, 2006
THIS INDE		_ day of		
BETWEEN	David Robert Thompson and Eli The Thompson Family trust date	izabeth Jan ed August 1	e Thompson l6, 2000.	the part 1=5 of the first part,
And	Craig A. White and Kelley White	e ·		the part is of the second part,
E C	TH: That the said part IES of the first N. THOUSAND NINE H	$\omega \sim \nu \kappa \iota$	=1/2/2/	K / Y Donais,
second p sell, conv forever, a UN	art, the receipt whereof is hereby a rey and confirm unto the said part is	cknowledge so of the so control	econd part, a land situate, l	jake or
L	ot 3C Block 18 Unit Sycan, l	Klamath	Falls Fore	est Estates

•	
WITNESS WHEREOF, the said partof the first above written.	t part, ha hereunto set hand an
Signed, Sealed and Delivered in the Presence of	(SEA)
David Falot they Tuste	(Seat
Ujalett Jan Hompson Sous	(SEA
PATE OF CALIFORNIA, County of	
	, before me, the undersigned, a Notary Public in a
r said County and State, personally appeared	to be the mercan subsect name
nown to me, ubscribed to the within Instrument, and acknow	to be the person whose name
2000, 2000 to the white Lines who will be a solid to	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
VITNESS my hand and official seal.	
	Notary Public in and for said County and State
	wounty rubber in and for said County and Said

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

	,
State of California County of LDS Ameles	ss.
County of	J
On 3 7 2006 before me,	Deanna Cabral
personally appeared DOW W HOBERT T	Name and Title of Officer (e.g., "Jage Doe, Notary Public") Name (s) of Signer(s)
	Name(s) of Signer(s) personally known to me
	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/shc/the/ executed
DEANNA CABRAL Commission # 1577964	the same in his/her(thei) authorized
Notary Public - Collifornia	signature(s) on the instrument the person(s) or
Los Angeles County My Comm. Biplies May 29, 2009	the entity upon behalf of which the person(s) acted, executed the instrument.
	WITMESS my hand and official seals
	Signature of Notary Public
	PTIONAL
Though the information below is not required by law, it may fraudulent removal and reatta	prove valuable to persons relying on the document and could prevent chment of this form to another document.
Description of Attached Document	
Title or Type of Document:	
•	Number of Pages:
Title or Type of Document: Document Date:	Number of Pages:
Title or Type of Document: Document Date:	
Title or Type of Document: Document Date: Signer(s) Other Than Named Above:	RIGHT THUMBPRINT
Title or Type of Document: Document Date: Signer(s) Other Than Named Above: Capacity(ies) Claimed by Signer Signer's Name:	
Title or Type of Document: Document Date: Signer(s) Other Than Named Above: Capacity(ies) Claimed by Signer Signer's Name: Individual Corporate Officer — Title(s):	RIGHT THUMBPRINT OF SIGNER Top of thumb here
Title or Type of Document: Document Date: Signer(s) Other Than Named Above: Capacity(ies) Claimed by Signer Signer's Name: Individual Corporate Officer — Title(s): Partner — Limited General	RIGHT THUMBPRINT OF SIGNER Top of thumb here
Title or Type of Document: Document Date: Signer(s) Other Than Named Above: Capacity(ies) Claimed by Signer Signer's Name: Individual Corporate Officer — Title(s): Partner — Limited General Attorney-in-Fact	RIGHT THUMBPRINT OF SIGNER Top of thumb here
Title or Type of Document: Document Date: Signer(s) Other Than Named Above: Capacity(ies) Claimed by Signer Signer's Name: Individual Corporate Officer — Title(s): Partner — Limited General	RIGHT THUMBPRINT OF SIGNER Top of thumb here
Title or Type of Document: Document Date: Signer(s) Other Than Named Above: Capacity(ies) Claimed by Signer Signer's Name: Individual Corporate Officer — Title(s): Partner — Limited General Attorney-in-Fact Trustee	RIGHT THUMBPRINT OF SIGNER Top of thumb here
Title or Type of Document: Document Date: Signer(s) Other Than Named Above: Capacity(ies) Claimed by Signer Signer's Name: Individual Corporate Officer — Title(s): Partner — Limited General Attorney-in-Fact Trustee Guardian or Conservator	RIGHT THUMBPRINT OF SIGNER Top of thumb here