

2007-008893

Klamath County, Oregon



00022562200700088930020024

05/15/2007 02:42:40 PM

Fee: \$26.00

After Recording Return to:

DEBORAH KAYE MASTERS

1001 Bridgeway #474  
Sausalito, Ca 94965

Until a change is requested all tax statements

Shall be sent to the following address:

DEBORAH KAYE MASTERS

Same as above

ATE: 64218 MS

**WARRANTY DEED**

(INDIVIDUAL)

FRANK RICHARD FELLE Y AND DONNA R. FELLE Y, herein called grantor, convey(s) to DEBORAH KAYE MASTERS, herein called grantee, all that real property situated in the County of KLAMATH, State of Oregon, described as:

Lot 10, Block 14, WEST CHILOQUIN, according to the official plat thereof on file in the office of the Clerk of Klamath County, Oregon.

CODE 012 MAP 3407-034CD TL 08600 KEY# 200856

and covenant(s) that grantor is the owner of the above described property free of all encumbrances except covenants, conditions, restrictions, reservations, rights, rights of way and easements of record, if any, and apparent upon the land, contracts and/or liens for irrigation and/or drainage

and will warrant and defend the same against all persons who may lawfully claim the same, except as shown above.

The true and actual consideration for this transfer is \$300,000.00. The execution of this Deed directly to the Grantee named herein is done at the direction of American Exchange Services, Inc. as part of a tax deferred exchange for the benefit of the Grantee named herein.

(here comply with the requirements of ORS 93.930)

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 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 CHAPTER 1, OREGON LAWS 2005 (BALLOT MEASURE 37 (2004)).

Dated May 7, 2007.

Frank Richard Felley  
FRANK RICHARD FELLE Y

Donna R Felley  
DONNA R. FELLE Y

california  
STATE OF OREGON, County of Riverside ) ss.  
FM

On May 10, 2006 personally appeared the above named FRANK RICHARD FELLE Y AND DONNA R. FELLE Y and acknowledged the foregoing instrument to be their voluntary act and deed.

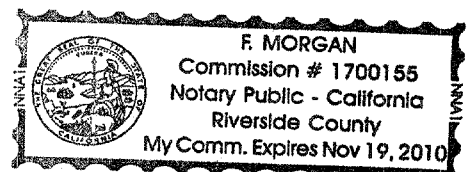
This document is filed at the request of:

 **Aspen**  
TITLE & ESCROW, INC.

525 Main Street  
Klamath Falls, OR 97601  
Order No.: 00064218

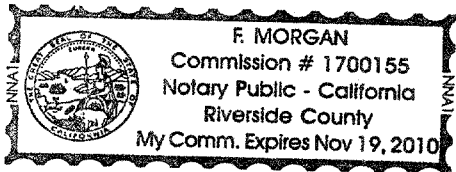
\$26A

Before me: F Morgan  
Notary Public for Oregon California  
My commission expires: Nov-19, 2010  
Official Seal



CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California  
County of Riverside } ss.  
On May 10, 2007, before me, F. Morgan Notary Public  
Date Name and Title of Officer (e.g., "Jane Doe, Notary Public")  
personally appeared Frank Richard Felley and  
Name(s) of Signer(s)  
Donna R. Felley



☐ 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/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.

WITNESS my hand and official seal.  
F. Morgan  
Signature of Notary Public

Place Notary Seal Above  
**OPTIONAL**  
Though the information below 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: May 7, 2007 Number of Pages: 1  
Signer(s) Other Than Named Above: \_\_\_\_\_

<b>Capacity(ies) Claimed by Signer(s)</b>	
Signer's Name: _____	Signer's Name: _____
<input type="checkbox"/> Individual	<input type="checkbox"/> Individual
<input type="checkbox"/> Corporate Officer — Title(s): _____	<input type="checkbox"/> Corporate Officer — Title(s): _____
<input type="checkbox"/> Partner — <input type="checkbox"/> Limited <input type="checkbox"/> General	<input type="checkbox"/> Partner — <input type="checkbox"/> Limited <input type="checkbox"/> General
<input type="checkbox"/> Attorney in Fact	<input type="checkbox"/> Attorney in Fact
<input type="checkbox"/> Trustee	<input type="checkbox"/> Trustee
<input type="checkbox"/> Guardian or Conservator	<input type="checkbox"/> Guardian or Conservator
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____
Signer Is Representing: _____	Signer Is Representing: _____
<div>RIGHT THUMBPRINT OF SIGNER Top of thumb here</div>	<div>RIGHT THUMBPRINT OF SIGNER Top of thumb here</div>