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NN

MARK D. SULLIVAN

Grantor's Name and Address

MARK & ALISON SULLIVAN

Grantee's Name and Address

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

MARK & ALISON SULLIVAN

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

SAME AS ABOVE

2007-019406
Klamath County, Oregon

||||||||||||||||||||||||||||||||||||||||||||

0003516620070019406 0010017

SPACE RESER
FOR
RECORDER'S

11/14/2007 11:28:21 AM   **Fee: $21.00**

BARGAIN AND SALE DEED – STATUTORY FORM
(INDIVIDUAL GRANTOR)

MARK D. SULLIVAN _____, Grantor,

conveys to __MARK D. SULLIVAN AND ALISON X. DENMAN SULLIVAN, as tenants
by the entirety_____, Grantee,

the following real property situated in __KLAMATH_____ County, Oregon, to-wit:

Lot 9 in Block 8 of WAGON TRAIL ACREAGES, NO. 1, Second Addition,
according to the official plat thereof on file in the office of the
County Clerk of Klamath, Oregon.

Recorded by West Coast Title &
Escrow as an Accommodation only.
No liability is accepted for the con-
dition of Title or for the validity, suf-
ficiency, or effect of this document.
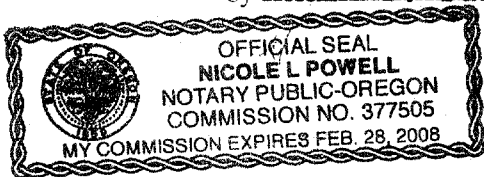
(IF SPACE INSUFFICIENT, CONTINUE DESCRIPTION ON REVERSE)

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

DATED __November 4__, 2007

THIS INSTRUMENT WILL NOT ALLOW USE OF THE PROPERTY DESCRIBED IN
THIS INSTRUMENT IN VIOLATION OF APPLICABLE LAND USE LAWS AND REGU-
LATIONS. 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
AND TO DETERMINE ANY LIMITS ON LAWSUITS AGAINST FARMING OR FOREST
PRACTICES AS DEFINED IN ORS 30.930.

MARK D. SULLIVAN

STATE OF OREGON, County of __Deschutes_____) ss. 11-4-07

This instrument was acknowledged before me on _____ 11-4-07 _____,

by __Mark D. Sullivan_____

OFFICIAL SEAL
NICOLE L POWELL
NOTARY PUBLIC-OREGON
COMMISSION NO. 377505
MY COMMISSION EXPIRES FEB. 28, 2008

Notary Public for Oregon

My commission expires __2/28/08__

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