2008-011024 Klamath County, Oregon

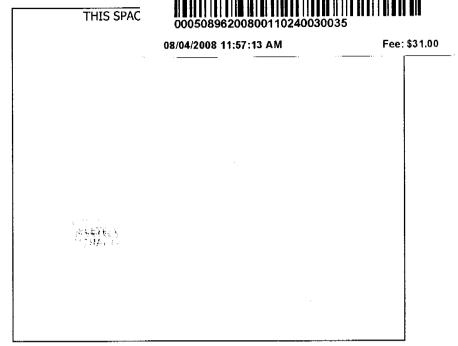


After recording return to: Thompson Family Trust PO Box 660626 Arcadia, CA 91066

Until a change is requested all tax statements shall be sent to the following address: Thompson Family Trust PO Box 660626 Arcadia, CA 91066

File No.: 7021-1258771 (ALF)

Date: July 09, 2008



STATUTORY WARRANTY DEED

Mercedes Garcia, Grantor, conveys and warrants to David Robert Thompson and Elizabeth Jane Thompson trustees of the Thompson Family Trust dated August 16, 2000, Grantee, the following described real property free of liens and encumbrances, except as specifically set forth herein:

LOTS 8 AND 11, BLOCK 22, TRACT 1010, FIRST ADDITION TO FERGUSON MOUNTAIN PINES, SITUATE IN SECTION 33, TOWNSHIP 35 SOUTH, RANGE 13 EAST OF THE WILLAMETTE MERIDIAN.

Subject to:

- 1. Fiscal year real property taxes, a lien not yet payable.
- 2. 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 \$5,000.00. (Here comply with requirements of ORS 93.030)

Page 1 of 2

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Statutory Warranty Deed - continued File No.: **7021-1258771 (ALF)** Date: **07/09/2008**

BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON TRANSFERRING FEE TITLE SHOULD INQUIRE ABOUT THE PERSON'S RIGHTS, IF ANY, UNDER ORS 195.300, 195.301 AND 195.305 TO 195-336 AND SECTIONS 5 TO 11, OF CHAPTER 424, OREGON LAWS 2007. 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 THAT THE UNIT OF LAND BEING TRANSFERRED IS A LAWFULLY ESTABLISHED LOT OR PARCEL, AS DEFINED IN ORS 92.010 OR 215.010, TO VERIFY THE APPROVED USES OF THE LOT OR PARCEL, 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 195.300, 195.301 AND 195.305 TO 195-336 AND SECTIONS 5 TO 11, OF CHAPTER 424, OREGON LAWS 2007.

AND SECTIONS 5 TO 11, OF CHAPTER 424, OREGON LAWS 2007.
Dated this $3 ext{day of} 3 ext{day of} 3 ext{day of} 4 ext{day of} 6 ext{day of} 6$
Mercedes Garcia Mercedes Garcia
STATE OF CA) County of Kos ANGELES)
This instrument was acknowledged before me on this 23 day of Jacky, 2008 by Mercedes Garcia.
Notary Public for CALIFORNIA My commission expires: 06-05-2012

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California	1
County of LOS ANGELES	Ì
T . 13: 7	DIAR GONZALES, NOTALY PUBLIC Here Insert Name and Title of the Officer GARCIA
On July 25 2068 before me,	Here Insert Name and Title of the Officer
personally appeared MERCEDES	GARCIA
	Name(s) of Signer(s)
	who 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
	hasheliney executed the same in his ner/their authorized
***************************************	capacity(ies), and that by his her their signature(s) on the
LYDIA R. GONZALES	instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.
Commission # 1800516 & Notary Public - California E	which the persons) acted, executed the instrument.
Los Angeles County	I certify under PENALTY OF PERJURY under the laws
My Cernm. Expires Jun 5, 2012.	of the State of California that the foregoing paragraph is
	true and correct.
	WITNESS my hand and official seal.
	and the second
Place Notary Seal Above	Signature Signature of Notary Public
OPTI	ONAL —————
Though the information below is not required by law, it and could prevent fraudulent removal and rea	may prove valuable to persons relying on the document attachment of this form to another document.
Description of Attached Document	
Title or Type of Document: SHTUTORY	WARRANTY DEED
Document Date: <u>07-09-2008</u>	Number of Pages: 2
Signer(s) Other Than Named Above:	
Capacity(ies) Claimed by Signer(s)	
MEDGETTE GAR	Signer's Name:
Signer's Name: VICO RECEIPES CONTROL	
Corporate Officer — Title(s):	☐ Individual
☐ Partner — ☐ Limited ☐ General	☐ Corporate Officer — Title(s): ☐ Partner — ☐ Limited ☐ General ☐ Corporate Officer — Title(s): ☐ Corporate Officer — Title(
Attorney in Fact Attorney in Fact RIGHT THUMBPRINT OF SIGNER	☐ Partner — ☐ Limited ↑ ☐ General RIGHT THUMBPRINT OF SIGNER
Trustee Top of thumb here	Trustee Top of thumb here
☐ Guardian or Conservator	☐ Guardian or Conservator
□ Other:	☐ Other:
Signer Is Representing:	Signer Is Representing:
<u> 254 </u>	

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