M108284D-P5

AmeriTitle

THIS SPACE F

2008-011850 Klamath County, Oregon



08/21/2008 11:27:43 AM

Fee: \$26.00

After recording return to:
JAMES D. CAREY & NANETTE M. CAREY
34941 DUKE DR.
CHILOQUIN, OR 97624
Until a change is requested all tax statements shall be sent to the following address:
JAMES D. CAREY & NANETTE M. CAREY
34941 DUKE DR.
CHILOQUIN, OR 97624
Escrow No. MT82840-PS

STATUTORY WARRANTY DEED

DAVID G. HODGES and KRISTIN S. HODGES, as tenants by the entirety, Grantor(s) hereby convey and warrant to JAMES D. CAREY and NANETTE M. CAREY, husband and wife, Grantee(s) the following described real property in the County of KLAMATH and State of Oregon free of encumbrances except as specifically set forth herein:

Lot 19 in Block 44 of 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.

The above-described property is free of encumbrances except all those items of record, if any, as of the date of this deed and those shown below, if any:

2008-2009 Real Property Taxes a lien not yet due and payable.

The true and actual consideration for this conveyance is \$65,000.00.

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, 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, CHAPTER 424, OREGON LAWS 2007.

195.305 TO 195.336 AND SECTIONS 5 TO 11, CHAPTER 424, OREGON LAWS 2007.
Dated this 18 day of AUGUST, 2008.
DAVID G. HODGES
KRISTIN S. HODGES
STATE OF CALIFORNIA)
COUNTY OF SONOMA) ss.
On August 18, 2008 before me, Numbr Cormus, Notary Public for the State of California, personally appeared DAVID G. HODGES and KRISTIN S. HODGES personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is presubscribed to the within instrument and acknowledged to me that they executed the same in their authorized capacity (ies) and that by their signatures 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.
Signature Notary Certificate Attached My commission expires:

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

	_
State of California	}
County of	
On AUGUST 18, 2008 before me, St	Mannon Ottoman Watery Public
personally appeared	Here Insert Name and Title of the Officer
	Name(s) of Signer(s)
Krist	in s. Horiges
SHANNON O'GORMAN COMM. #1779356 NOTARY PUBLIC - CALIFORNIA O SONOMA COUNTY COMM. EXPIRES NOV. 10, 2011	who proved to me on the basis of satisfactory evidence to be the person whose names 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 signatures on the instrument the person or the entity upon behalf of which the person acted, executed the instrument. I certify under PENALTY OF PERJURY under the laws
	of the State of California that the foregoing paragraph is true and correct.
	WITNESS my hand and official seal.
Place Notary Seal Above	Signature of Notary Public Communication Signature Signatu
Though the information below is not required by law, i	TIONAL ————————————————————————————————————
Description of Attached Document	reattachment of this form to another document.
Title or Type of Document: Statutor	y Warranty Dead
Document Date: 8/18/08	Number of Pages:
Signer(s) Other Than Named Above:	Number of Pages:
Capacity(ies) Claimed by Signer(s)	
Signer's Name: Individual Corporate Officer — Title(s): Partner — Limited General Attorney in Fact Trustee Guardian or Conservator Other: Signer le Popragantine:	☐ Individual ☐ Corporate Officer — Title(s): ☐ Partner — ☐ Limited ☐ General ☐ Attorney in Fact ☐ Trustee ☐ Guardian or Conservator ☐ Other: ☐ Other:
Signer Is Representing:	Signer Is Representing:

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