THIS INSTRUMENT WILL NOT ALLOW USE OF THE INSTRUMENT IN VIOLATION OF APPLICABLE LANI REGULATIONS. BEFORE SIGNING OR ACCEPTING PERSON ACQUIRING FEE TITLE TO THE PROPERTY APPROPRIATE CITY OR COUNTY PLANNING DEPAI USES. (ORS 93.040 (1))

## 2008-016902

Klamath County, Oregon



ASSESSOR PARCEL No. R-351/-0/000-07300-NOTE: Deed prepared by Grantor Below. NAME: SOAPTAN LAND & CATTLE COLLC. ADDRESS: 3900 HANCOCK OR.

CITYISTIZIP: SACRAMENTO, CA 95821

WHEN RECORDED MAIL TO (GRANTEE): MAIL TAX STATEMENTS TO (GRANTEE): NAME: JOHN + CLAIRE SENEY

ADDRESS: 5/22 E. UNION AVE CITYISTIZIP: SPOKANE, WA 997 . WA 9921Z 12/30/2008 09:51:14 AM

Fee: \$26.00

		540	E PRICE
SPECIAL	WARRANTY D	EED 📲	4050,00

SPECIAL W.	ARRANTI DEED -# 4050.00
FOR VALUABLE CONSIDERATION, receipt of w	hich is acknowledged, the Grantor (seller)
whose name(s) is/are: SDADTAN LAND AND	CATTLE COMPANY LLC.
Spartan Land AND  Does conveys and specially warrants to:  JOHN SENEY AND	CLAIRE SENEY
Grantce, the following described real property free	of encumberances created by the Grantor, situated in:
KLAMATH CO	unty, oregod
OREGON PINES, BLOC	¥15, LOT 9
	, , , , , , , , , , , , , , , , , , ,
Witness Whereof, my hand has been set on	December 22 20 08
Sportan Vandard Cottle Compay We Signature on line above	
<del>-</del>	Signature on line above
leter Vincade - Member (8 Mg)	<u></u>
Print on line above	Print on line above
. 1	
On 12/22/,2008 By Witness my hand and official seal	Robient Kinlade
Witness my hand and official seal	•
Notary Public in and for said County and State	JITENDRA D. PATEL
-12012-018	то (Сомм. # 1679310 г.)
My commission expires on: 7/28/2010	SACRAMENTO COUNTY MY COMM. EXP. JULY 29, 2010

## **CALIFORNIA ALL-PURPOSE** CERTIFICATE OF ACKNOWLEDGMENT

State of California				
County of SACPAMENT2				
On 12/27/08 before me, TITENT personally appeared POSERT K	(Here insert name and title of the officer)  Cincole			
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 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.				
I certify under PENALTY OF PERJURY under the l is true and correct.	aws of the State of California that the foregoing paragraph			
WITNESS my hand and official seal.  Signature of Notary Public	JITENDRA D. PATEL COMM. # 1679310 NOTARY PUBLIC-CALIFORNIA SACRAMENTO COUNTY MY COMM. EXP. JULY 29, 2010 T (Notary Seal)			
ADDITIONAL OPTIONAL INFORMATION				
DESCRIPTION OF THE ATTACHED DOCUMENT  (Title or description of attached document)  (Title or description of attached document continued)	INSTRUCTIONS FOR COMPLETING THIS FORM  Any acknowledgment completed in California must contain verbiage exactly as appears above in the notary section or a separate acknowledgment form must be properly completed and attached to that document. The only exception is if a document is to be recorded outside of California. In such instances, any alternative acknowledgment verbiage as may be printed on such a document so long as the verbiage does not require the notary to do something that is illegal for a notary in California (i.e. certifying the authorized capacity of the signer). Please check the document carefully for proper notarial wording and attach this form if required.			
Number of Pages Document Date 17	<ul> <li>State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment.</li> <li>Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed.</li> </ul>			
(Additional information)	<ul> <li>The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public).</li> <li>Print the name(s) of document signer(s) who personally appear at the time of</li> </ul>			
CAPACITY CLAIMED BY THE SIGNER  Individual (s) Corporate Officer  (Title) Partner(s)	<ul> <li>notarization.</li> <li>Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/she/they, is /are) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording.</li> <li>The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form.</li> <li>Signature of the notary public must match the signature on file with the office of the parameter of the production.</li> </ul>			

the county clerk.

Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document.

Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary).

Indicate title or type of attached document, number of pages and date.

· Securely attach this document to the signed document

2008 Version CAPA v12.10.07 800-873-9865 www.NotaryClasses.com

Attorney-in-Fact

☐ Trustee(s)

☐ Other \_\_