

2008-016948

Klamath County, Oregon



00058065200800169480030038

This document prepared by (and after  
recording return to):

Name: Albert Chanchorena Jr.

Firm/Company:

Address: 11023 Vernon Ave.

Address 2:

City, State, Zip: Ontario, CA 91762

Phone: 951 833-3816

Until a change is requested all tax statements  
shall be sent to the following address:

11023 Vernon Ave.

Ontario, CA 91762

Escrow No.

Title No.

12/30/2008 12:29:05 PM

Fee: \$31.00

-----Above This Line Reserved For Official Use Only-----

## BARGAIN AND SALE DEED

### KNOW ALL MEN BY THESE PRESENTS THAT:

FOR VALUABLE CONSIDERATION OF TEN DOLLARS (\$10.00), and other good and valuable consideration, cash in hand paid, the receipt and sufficiency of which is hereby acknowledged, **Patricia A. Goni**, an individual, referred to as "Grantor", does hereby convey unto **Albert Chanchorena Jr.**, an individual, hereinafter referred to as "Grantee", whether one or more, the following lands and property, together with all improvements located thereon, lying in the County of Klamath, State of Oregon, to-wit:

Lot 12 in Block 17 of TRACT NO. 1127 - NINTH ADDITION TO SUNSET VILLAGE, according to the official plot thereof on file in the office of the County Clerk of Klamath County, Oregon.

Tax Account No. 3909-12CD-5400-000

Known as; 4152 Valinda Way Klamath Falls, OR 97603

Prior instrument reference: Book \_\_\_\_\_, Page \_\_\_\_\_, Document No. \_\_\_\_\_, of the Public Records of the County Clerk of \_\_\_\_\_ County, Oregon.

The true and actual consideration paid for this transfer, stated in terms of dollars, is \$10. [However, the actual consideration consists of or included other property or value given or promised which is the whole part of the (indicate which) consideration.] (The sentence between the symbols ([ ]), if not applicable, should be deleted. See ORS 93.030.)

In construing this deed, where the context so required, the singular includes the plural, and all grammatical changes shall be made so that this deed shall apply equally to corporations and to individuals.

WITNESS Grantor(s) hand(s) this the 19<sup>th</sup> day of December, 2008.

Yvette Moffatt POA  
signing for Patricia A. Goni  
Yvette Moffatt, Power of Attorney,  
signing for Patricia A. Goni, Grantor

**This instrument will 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.**

STATE OF OREGON

COUNTY OF KLAMATH

This instrument was acknowledged before me on SEE ATTACHMENT (date) by \_\_\_\_\_ (name(s) of person(s))

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Print Name

My Commission Expires: Oct 28, 2011

**Grantor(s) Name, Address, phone:**

Patricia A. Goni  
4155 S CR 157  
Strasburg, CO 80136  
303-622-9302

**Grantee(s) Name, Address, phone:**

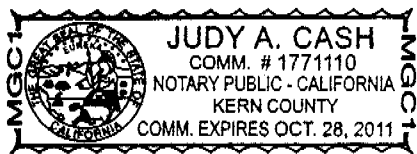
Albert Chanchorena  
11023 Vernon Ave.  
Ontario, CA 91762  
951 833-3816

# CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California

County of KERN

On 12-19-08 before me, JUDY A CASH  
Date Here Insert Name and Title of the Officer  
personally appeared YVETTE MOFFATT POA FOR PATRICIA A GONZ  
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 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 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 Judy A Cash  
Signature of Notary Public

## 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: \_\_\_\_\_

Document Date: \_\_\_\_\_ Number of Pages: \_\_\_\_\_

Signer(s) Other Than Named Above: \_\_\_\_\_

### 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 Is Representing: \_\_\_\_\_

RIGHT THUMBPRINT  
OF SIGNER  
Top of thumb here

Signer's Name: \_\_\_\_\_

- ☐ Individual  
☐ Corporate Officer — Title(s): \_\_\_\_\_  
☐ Partner — ☐ Limited ☐ General  
☐ Attorney in Fact  
☐ Trustee  
☐ Guardian or Conservator  
☐ Other: \_\_\_\_\_

Signer Is Representing: \_\_\_\_\_

RIGHT THUMBPRINT  
OF SIGNER  
Top of thumb here