**2009-007901 Klamath County, Oregon** 



0000730020090

06/08/2009 03:21:09 PM

Fee: \$36.00



After recording return to:
Donald Bruce Butler and Dianna L.
Butler
18805 SW Hart Road
Beaverton, OR 97007

Until a change is requested all tax statements shall be sent to the following address:
Donald Bruce Butler and Dianna L.
Butler
18805 SW Hart Road
Beaverton, OR 97007

File No.: 7021-1415896 (DMC)

Date: May 29, 2009

### STATUTORY WARRANTY DEED

THIS SPAC

**Georgia Jenkins-Wenger and James K. Jenkins**, Grantor, conveys and warrants to **Donald Bruce Butler and Dianna L. Butler as tenants by the entirety**, Grantee, the following described real property free of liens and encumbrances, except as specifically set forth herein:

**LEGAL DESCRIPTION:** Real property in the County of Klamath, State of Oregon, described as follows:

LOT 83 OF FOURTH ADDITION TO HARBOR ISLES, TRACT 1347, ACCORDING TO THE OFFICIAL PLAT THEREOF ON FILE IN THE OFFICE OF THE COUNTY CLERK OF KLAMATH COUNTY, OREGON.

### Subject to:

1. 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 \$57,900.00. (Here comply with requirements of ORS 93.030)

APN: R886083

Statutory Warranty Deed

File No.: **7021-1415896 (DMC)**Date: **05/29/2009** 

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.

Dated thisday of		_, 20 <u>09</u> .	
James K. Jenkins		Georgia Jenkins	Ognheine (Linger) Wenger
. <del>STATE OF Orego</del> n ) )ss.			
County of)			
This instrument was acknowledged before n by James K. Jenkins and Georgia Jenkin		day of	, 20
see attachad			
CANDIANY CLAHRICOHP	N <del>otary Public</del> My <u>commissic</u>		

## CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

State of California

County of Sacramento

On <u>0-4-2009</u> before Katarina Rose Ann Gomez, a Notary Public,

personally appeared Georgia A Jenkins-

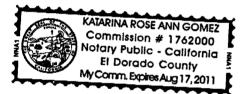
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is are subscribed to the within instrument and acknowledged to me that he/(he) they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), 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.

Signature of Notary Public

(Notary Seal)



### ADDITIONAL OPTIONAL INFORMATION

# DESCRIPTION OF THE ATTACHED DOCUMENT WONDED DESCRIPTION OF THE ATTACHED DOCUMENT (Title or description of attached document) (Title or description of attached document continued) Number of Pages Document Date 6/4/69 (Additional information)

CAPACITY CLAIMED BY TH	E SIGNER
Individual (s)  Corporate Officer	
(Title)	.
Partner(s)	
☐ <u>Attorney in Eact</u>	
☐— <del>Trustee(s)</del> ☐ Other	_
	Thumbprint of Signer 1

### 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.

- State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment.
- Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed.
- 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).

CAPACITY CLAIMED BY TH	HE SIGNER
☐ Individual (s)	
☐ Corporate Officer	
	- 11 1
(Title)	$ V / \gamma $
Attorney in Fact	
Trustee(s)	1 1
Other-	
	<u>                                   </u>
	Thumbprint of Signer 2

## CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

State of California

County of Sacramento

On <u>0-5-2009</u> before Katarina Rose Ann Gomez, a Notary Public,

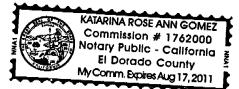
personally appeared James Kosta Jenkins

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) 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 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.

(Notary Seal)



## ADDITIONAL OPTIONAL INFORMATION

# DESCRIPTION OF THE ATTACHED DOCUMENT Warrenty Deocl (Title or description of attached document) (Title or description of attached document continued) Number of Pages 2 Document Date 6/4/09 (Additional information)

Individual (s)	
Corporate Officer	
(Title)	·
☐- Partner(s)	
- Anomey-in-Fact	
- Trustee(s)	
Other	_
	Thumbprint of Signer

### INSTRUCTIONS FOR COMPLETING THIS FORM

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CAPACITY CLAIMED BY TH	E SIGNER
<del>'□ Individual (s)</del>	
Corporate Officer	ا برزا
	.   [\],
(Title)	'
$\Box$ -Partner(s)	
——Attorney-in-Fact	[ T
Trustec(s)	
Other	_
	Thumbprint of Signer 2