2011-005001 Klamath County, Oregon



04/20/2011 11:36:13 AM

Fee: \$47.00

Document type: BARGAIN AND SALE DEED

Grantor:

Willa R. Ulmer

Grantee:

Willa R. Ulmer Revocable Living Trust

After recording,

return to:

Willa R. Ulmer

54917 Lee Valley Road Coquille, OR 97423

Consideration: None

Address for Tax Statements:

Willa R. Ulmer

54917 Lee Valley Road Coquille, Oregon 97423

BARGAIN AND SALE DEED

Willa R. Ulmer, Grantor, conveys to the Willa R. Ulmer Revocable Living Trust dated January 19, 2011, Grantee, all of her interest in the following-described real property, situated in Klamath County, State of Oregon:

A parcel of land in the Southeast quarter of the Southwest quarter of Section 30, Township 24 South, Range 9 East of the Willamette Meridian, more particularly described as follows:

Beginning at a point South 300 feet from the Northeast corner of the SE¼ of SW¼ of said Section 30, said point being the Southeast corner of that parcel of property deeded to Shelby E. Quackenbush and Hershelea Quackenbush by deed recorded June 8, 1972, in Volume M-72 at page 6115; thence South a distance of 200 feet; thence North 50°20′ West a distance of 200 feet, more or less, to a point South of the Southwest corner of said Quackenbush parcel; thence North a distance of 100 feet to the Southwest corner of said Quackenbush property; thence East along the said Quackenbush property a distance of 120 feet, more or less, to the point of beginning.

Subject to: Taxes for fiscal year commencing July 1, 1972, which are now a lien but not yet payable; Easements and rights of way of record and those apparent on the land, if any.

TO HAVE AND TO HOLD the above described and granted premises unto the said grantees, their heirs and assigns forever.

And I the grantor do covenant that I am lawfully seized in fee simple of the above granted premises free from all encumbrances and that I will and my heirs, executors and administrators, shall warrant and forever defend the above granted premises, and every part and parcel thereof, against the lawful claims and demands of all persons whomsoever.

The true and actual consideration of this conveyance in terms of dollars is NONE. This is being transferred for estate planning purposes only.

STATEMENT PURSUANT TO ORS 93.040: 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.

DATED this 22 nct day of _	March	_, 2011.

Willa R. Ulmer, Grantor

STATE OF OREGON)
) ss.
County of Coos)

Personally appeared before me this _______, day of ________, 2011, the above named Willa R. Ulmer acknowledged the foregoing instrument to be her voluntary act and deed.

Notary Public for Oregon

My Commission Expires: 12-4-2012

OFFICIAL SEAL
TERESA M FJELD
NOTARY PUBLIC - OREGON
COMMISSION NO. 434864
MY COMMISSION EXPIRES DECEMBER 4, 2012

STATE OF OREGON CERTIFICATION OF VITAL RECORD

OREGON DEPARTMENT OF HUMAN SERVICES

554 LD. TAG	259 : NO.		CERTIFICATE	OF DEATH		STATE FILE NUMB	ER.
1. Legal Name	First Frederick	Middle John	Last Ulmer		Suffix	2. Death Date August 10, 20	009
3. Sex Male		ears	Security Number	543-20-7907	6. County of Coos	of Death	
7. Birthdate November 28,	1921 L	thplace odi, California	ti. Decedent's Race(s		High s	r's Education chool grad. or GED Was Decedent Ever in	
10. Was Decedent of NO 13. Residence: Num			White	14. City/Town		U.S. Armed Forces? Yes	
54917 Lee Val 15. Residence Count	ley Road	16. State or Fore	ign Country	17. Zip Code + 4 97423		18. Inside City Limits?	
Coos 19. Marital Status at Married	Time of Death		ouse's Name Prior to F Villa Sargent				
21. Usual Occupation Foreman	1			22. Kind of Busi B.L.M.			
23. Father's Name John F. Ulmer 25. Informant's Name		26. Telephone Nu		24. Mother's Name Prior to Christina Burback to Decedent 28. Melling		+	
23. Father's Name John F. Ulmer 25. Informant's Name Willa Ulmer 29. Place of Death Hospital-Inpat 31. Location of Death		Not Available	Spouse 30. Facility Name Bay Area F		ee Valley Ro	ad, Coquille, OR 9742	23
			32. City/Town or Coos Bay	Location of Death	33. State Oregon	34. Zip Code +4 97420	
1775 Thompso 35. Method of Dispos Burial 38. Name and Compl	ition		ion 1emorial Gardens		37. Location Coguille,		
August 17, 204 42. Registrar's Sign. 45. Amendment		1	Jay J Westrum 43. Di	tte Rocolved	CO-3	619 Local File Number	
46. Was case referred O Yes 15 No	f to Medical Examin	er? 47. Autops □ Yes	St.No death?	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	complete the cau	se of 49. Time of Deat 8:13AM	ih
50. Enter the chain of such as cardiac a	events - diseases, mest, respiratory am	njuries, or complicati	CAUSE OF ons - that directly cause Batton without showing	od the death. DO NOT ENT the etiology. DO NOT ABB	ER TERMINAL I REVIATE	EVENTS Approximate i	
Final disease or condition resulting in death->	condition imini	O (or sa a co Jugno)	W ANG	CR)			
leading to the cause is ENTER THE UNDERL CAUSE LAST (disease	ted on line a. b. YING Due to	o lor se a coramo uence	in or				
that initiated the event death).	s resulting in Due to	(or se a consequence					
	(selle)	unal	esulting brithe underlying	(LLNCV)	1//		
	tomicide	connect at time of death	Not pregnant, bu Unknown if preg will had dely before deal	t programt 43 days to 1 year bu part within the past year h	fore death	id tobacco use contribute to d Yes Probably No Unknown	peaun r
55. Date of injury (MCN	ов утууу 5 6. Тит	e of Injury 57. Pla	ce of injury (e.g., Decede	ni'a home, construction site, ret	taurant, wooded an	Ma) 58. Injury at Work? □ Yes □ No □ Un	Henown
59. Location of Injury (City/Town, Stein, 29*4	100 To 10			lon injury, specify.	
- Albanost				www.	Other (Spe		estrien
	chardson,	1900 Wood3	and Drive,	Coos Bay, Oreg	on 97420		
63. Name and Title of	ruending Physician	T Onler man cevine					

65. UMD12801

DATE ISSUED:

THIS IS A TRUE AND EXACT REPRODUCTION OF THE DOCUMENT OFFICIALLY REGISTERED AT THE OFFICE OF THE COOS COUNTY REGISTRAR.

Medical Doctor

AUG 13 2009

