THIS INSTRUMENT WILL NOT ALLOW USE IN THIS INSTRUMENT IN VIOLATION OF AI AND REGULATIONS. BEFORE SIGNING OR THE PERSON ACQUIRING FEE TITLE TO TI WITH THE APPROPRIATE CITY OR COUNT VERIFY APPROVED USES.

ASSESSOR PARCEL No. R-3611-00 300-00800-NOTE: Deed prepared by Grantor below. NAME: MIKE KINCADE ADDRESS: 3900 HANCOXKDR

CITYISTIZIP: SACRAMENTO, CA 95821

WHEN RECORDER MAIL TO (GRANTEE): MAIL TAX STATEMENTS TO (GRANTEE):

NAME: ERNEST MARSH C/OTOPWADDIE

ADDRESS: PANIOLA TRUST

POWHATAN, VA 23139

2011-005495

Klamath County, Oregon



05/04/2011 09:11:16 AM

Fee: \$42.00

				SALE PRICE	E
PECIAL '	WARRA	NTY D	EED	\$ 3550.	00

SPECIAL WARRANTY DEED # 3530.00
FOR VALUABLE CONSIDERATION, receipt of which is acknowledged, the Grantor (Seller) whose name(s) is/are. MIKE KINCADE
Does conveys and specially warrants to: TOPWADDIE PANIOLA TRUST
Grantee, the following described real property free of encumberances created by the Grantor, situated in:
NIMFOORIVER PARK 5TH ADDITION, BLOCK 57, WIT 8
Witness Whereof, my hand has been set on
Signature on line above Signature on line above
Print on line above Print on line above
On
My commission expires on:

DECIAL WAZZAN PDEED

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California	
County of <u>Sucvensen</u> to	}
• 7	of the state of the state of
On <u>7/30/20//</u> before me,	Mark Tenty (Wata - Public)
personally appeared	Kirracle Name(s) of Signer(s)
e e	ivanie(s) or aigner(s)
MARK TEPLY COMM. # 1844986 NOTARY PUBLIC CALIFORNIA SACRAMENTO COUNTY MY COMM. EXP. APR. 18, 2013	who proved to me on the basis of satisfactory evidence to be the person(s) whose name(e) 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.
	Signature
Place Notary Seal Above	Signature of Notary Public
Though the information below is not required by la	PTIONAL aw, it may prove valuable to persons relying on the document and reattachment of this form to another document.
Description of Attached Document	
Title or Type of Document:	Number of Pages:
Document Date: 4/30 /2011	Number of Pages:
Signer(s) Other Than Named Above:	
Capacity(les) 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:	☐ Individual ☐ Corporate Officer — Title(s): ☐ Partner — ☐ Limited ☐ General ☐ Attorney in Fact ☐ Attorney in Fact ☐ Corporate Officer — Title(s): ☐ Partner — ☐ Limited ☐ General ☐ Of Signer

© 2007 National Notary Association • 9350 De Soto Ave., P.O. Box 2402 • Chatsworth, CA 91313-2402 • www.NationalNotary.org | Item #5907 | Reorder: Call Toll-Free 1-800-878-6827

PAGE ZOFZ Special WARLANT proced