

2012-004778 Klamath County, Oregon

05/07/2012 03:26:29 PM

Fee: \$47.00

After recording return to: BEATRICE M. NAYLOR

2926 FRONT ST. SP A-1

KLAMATH FALLS, OR 97601

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

BEATRICE M. NAYLOR

2926 FRONT ST. SP A-1

KLAMATH FALLS, OR 97601

Escrow No. MT93320-LW

Title No.

0093320

SWD r.020212

## STATUTORY WARRANTY DEED

THIS SPA

## JULIANNE M. DALTON,

Grantor(s), hereby convey and warrant to

## BEATRICE M. NAYLOR,

Grantee(s), the following described real property in the County of KLAMATH and State of Oregon free of encumbrances except as specifically set forth herein:

Unit No. A-1 of HARBOR ISLES CONDOMINIUMS, PHASE I, TRACT 1238, and further described in that certain Declaration recorded in Volume M83, page 21250 of the Deed Records of Klamath County, Oregon, appertaining to that real property situated in Klamath Falls, Oregon, and more completely described in said Declaration, which Declaration is incorporated herein by reference and made a part hereof as if fully set forth herein, together with an undivided interest in the general common elements appertaining to said condominium as set forth in said Declaration, and said Condominium Unit shall be used subject to the provisions, covenants, restrictions and limitations as set forth in said Declaration, including the plans and other exhibits which are a part thereof and the Bylaws of Harbor Isles Condominium Owner's Association recorded simultaneously therewith.

The true and actual consideration for this conveyance is \$125,000.00.

The above-described property is free of encumbrances except all those items of record, if any, as of the date of this deed and those shown below, if any:

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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, CHAPTER 424, OREGON LAWS 2007, SECTIONS 2 TO 9 AND 17, CHAPTER 855, OREGON LAWS 2009, AND SECTIONS 2 TO 7, CHAPTER 8, OREGON LAWS 2010. 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, CHAPTER 424, OREGON LAWS 2007, SECTIONS 2 TO 9 AND 17, CHAPTER 855, OREGON LAWS 2009, AND SECTIONS 2 TO 7, CHAPTER 8, OREGON LAWS 2010.

Dated this 3 day of 6 pril 2012

July anne Do Delton

JULIANNE M. DALTÓN

STATE OF CALIFORNIA

COUNTY OF SILVER SS.

WITNESS my hand and official seal.

WITTED MY MAIN WITTED AND MY

03/29/2015

See Attached sheet for CA- Dorday.

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## CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

State of California	
County of Masta	· · · · · · · · · · · · · · · · · · ·
on 430-2012 before me, Jone L. Balen Notay Public personally appeared Julianne M. Oalton	
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	
WITNESS my hand and official seal.	TONI L. GALEA COMM. # 1929644 NOTARY PUBLIC - CALIFORNIA SHASTA COUNTY MY COMM. EXP. MAR. 29, 2015
27/2015	•
ADDITIONAL OPTIONAL INFORMATION	
	INSTRUCTIONS FOR COMPLETING THIS FORM  Any acknowledgment completed in California must contain verbiage exactly as
DESCRIPTION OF THE ATTACHED DOCUMENT	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
The thory harrait	document is to be recorded outside of California. In such instances, any alternative
(Type of ageription of agriched document)	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.
(Title of description of attached document continued)  Number of Pages Document Date 200	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.
(Additional information)	. 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).  Print the name(s) of document signer(s) who personally appear at the time of
CAPACITY CLAIMED BY THE SIGNER	notarization.  Indicate the correct singular or plural forms by crossing off incorrect forms (i.e.
Individual (s)	he/she/they. is /are ) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording.
☐ Corporate Officer	<ul> <li>The notary seal impression must be clear and photographically reproducible.</li> </ul>
(Title)	Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form.
☐ Partner(s)	<ul> <li>Signature of the notary public must match the signature on file with the office of the county clerk.</li> </ul>
☐ Attorney-in-Fact ☐ Trustee(s)	<ul> <li>Additional information is not required but could help to ensure this</li> </ul>
☐ Trustee(s) ☐ Other	acknowledgment is not missued or attached to a different document.  Indicate title or type of attached document, number of pages and date Indicate the capacity claimed by the signer. If the claimed capacity is a
	corporate officer, indicate the title (i.e. CEO, CFO, Secretary).  Securely attach this document to the signed document
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