

2012-006445

Klamath County, Oregon

*Grantors:*

G. LOREN SANGREE &  
SALLY D. SANGREE  
6411 RINGO CIRCLE  
HUNTINGTON BEACH, CA 92647



00119688201200064450050051

06/13/2012 08:20:54 AM

Fee: \$57.00

*Grantees:*

G. LOREN SANGREE &  
SALLY D. SANGREE, TRUSTEES  
as above

*After Recording Return To:*

G. LOREN SANGREE &  
SALLY D. SANGREE, TRUSTEES  
6411 RINGO CIRCLE  
HUNTINGTON BEACH, CA 92647

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

SAME AS ABOVE

Space Above For Recorder's Use

**WARRANTY DEED**

**GRANTORS, G. LOREN SANGREE and SALLY D. SANGREE, HUSBAND AND WIFE**, as joint tenants, the undersigned grantors, do hereby grant, bargain, sell and convey to

**G. LOREN SANGREE and SALLY D. SANGREE, TRUSTEES, THE SANGREE FAMILY LIVING TRUST**

whose address is 6411 RINGO CIRCLE, HUNTINGTON BEACH, CALIFORNIA 92647, all right, title and interest in that certain Property situated in KLAMATH County, State of OREGON, and described as follows:

R3711-014DO-02500-000-00 Key 383800, Klamath Forest Estates  
Highway 66 Unit No. 4  
Lot 65m Block 81

To Have and to Hold the granted premises unto the Grantees, their Heirs and Assigns forever.

Together with the tenements, hereditaments, and appurtenances thereunto belonging or appertaining, and the reversion and reversions, remainder and remainders, rents, issues, and profits thereof.

And the Grantors do covenant that they are lawfully seized in fee simple of the above granted premises free from all encumbrances EXCEPT: NONE and that they will and their heirs, executors and administrators, shall warrant and forever defend the granted premises, against the lawful claims and demands of all persons, except as above stated.

**The True and Actual Consideration Paid for this Transfer, Stated in Terms of Dollars, is -0-.**  
**TRANSFER TO PRESENT OWNER'S REVOCABLE TRUST. EXEMPTION 3.04.030J.13**

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 4th day of December, 2009

G. Loren Sangree  
G. LOREN SANGREE

Sally D. Sangree  
SALLY D. SANGREE

# CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

State of California

County of Orange

On December 4 2009 before me, Matt Oslie, Notary Public

(Here insert name and title of the officer)

personally appeared George Loren Sangree & Sally Donna Lee Sangree

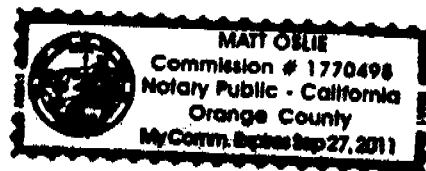
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s),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

Matt Oslie  
Signature of Notary Public

(Notary Seal)



## ADDITIONAL OPTIONAL INFORMATION

### DESCRIPTION OF THE ATTACHED DOCUMENT

Co-ownership Deed

(Title or description of attached document)

(Title or description of attached document continued)

Number of Pages 1 Document Date 12-4-09

(Additional information)

### CAPACITY CLAIMED BY THE SIGNER

- ☐ Individual(s)  
☐ Corporate Officer

(Title)

- ☐ Partner(s)  
☐ Attorney-in-Fact  
☐ Trustee(s)  
☐ Other

### 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).
  - Print the name(s) of document signer(s) who personally appear at the time of notarization.
  - Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/she/they, is/are) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording.
  - The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form.
  - Signature of the notary public must match the signature on file with the office of the county clerk.
    - ❖ Additional information is not required but could help to ensure this acknowledgment is not misused 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, COO, Secretary).
- To certify which this document is the original document.

Please write Assessor's Parcel Number(s): 146-521-08

Please answer, to the best of your knowledge, all applicable questions, then sign and date. If a question does not apply, indicate with "N/A."

**PART III: PURCHASE PRICE AND TERMS OF SALE**

**A. CASH DOWN PAYMENT OR value of trade or exchange (excluding closing costs)** Amount \$ \_\_\_\_\_

**B. FIRST DEED OF TRUST @** \_\_\_\_\_ % interest for \_\_\_\_\_ years. Pymts./Mo. = \$ \_\_\_\_\_ (Prin. & Int. only) Amount \$ \_\_\_\_\_

☐ FHA (\_\_\_\_\_ Discount Points) ☐ Fixed rate ☐ New loan

☐ Conventional ☐ Variable rate ☐ Assumed existing loan balance

☐ VA (\_\_\_\_\_ Discount Points) ☐ All inclusive D.T. (\$ \_\_\_\_\_ Wrapped) ☐ Bank or savings & loan

☐ Cal-Vet ☐ Loan carried by seller ☐ Finance company

Balloon payment ☐ Yes ☐ No Due Date \_\_\_\_\_ Amount \$ \_\_\_\_\_

**C. SECOND DEED OF TRUST @** \_\_\_\_\_ % interest for \_\_\_\_\_ years. Pymts./Mo. = \$ \_\_\_\_\_ (Prin. & Int. only) Amount \$ \_\_\_\_\_

☐ Bank or savings & loan ☐ Fixed rate ☐ New loan

☐ Loan carried by seller ☐ Variable rate ☐ Assumed existing loan balance

Balloon payment ☐ Yes ☐ No Due Date \_\_\_\_\_ Amount \$ \_\_\_\_\_

**D. OTHER FINANCING: Is other financing involved not covered in (b) or (c) above?** ☐ Yes ☐ No Amount \$ \_\_\_\_\_

Type \_\_\_\_\_ @ \_\_\_\_\_ % interest for \_\_\_\_\_ years. Pymts./Mo. = \$ \_\_\_\_\_ (Prin. & Int. only)

☐ Bank or savings & loan ☐ Fixed rate ☐ New loan

☐ Loan carried by seller ☐ Variable rate ☐ Assumed existing loan balance

Balloon payment ☐ Yes ☐ No Due Date \_\_\_\_\_ Amount \$ \_\_\_\_\_

**E. WAS AN IMPROVEMENT BOND ASSUMED BY THE BUYER?** ☐ Yes ☐ No Outstanding Balance: Amount \$ \_\_\_\_\_

**F. TOTAL PURCHASE PRICE (or acquisition price, if traded or exchanged, include real estate commission if paid)** **TOTAL ITEMS A THROUGH E** \$ \_\_\_\_\_

**G. PROPERTY PURCHASED** ☐ Through a broker ☐ Direct from seller ☐ From a family member ☐ Other (please explain): \_\_\_\_\_

If purchased through a broker, provide broker's name and phone number: \_\_\_\_\_

Please explain any special terms, seller concessions, or financing and any other information that would help the Assessor understand the purchase price and terms of sale: \_\_\_\_\_

**PART IV: PROPERTY INFORMATION**

**A. TYPE OF PROPERTY TRANSFERRED:**

☐ Single-family residence ☐ Agricultural ☐ Timeshare

☐ Multiple-family residence (no. of units: \_\_\_\_\_) ☐ Co-op/Own-your-own ☐ Manufactured home

☐ Commercial/Industrial ☐ Condominium ☐ Unimproved lot

☐ Other (Description: i.e., timber, mineral, water rights, etc. \_\_\_\_\_)

**B. IS THIS PROPERTY INTENDED AS YOUR PRINCIPAL RESIDENCE?** ☐ Yes ☐ No

If yes, enter date of occupancy \_\_\_\_\_ / \_\_\_\_\_ / 20\_\_\_\_ or intended occupancy \_\_\_\_\_ / \_\_\_\_\_ / 20\_\_\_\_

(month) (day) (year) (month) (day) (year)

**C. IS PERSONAL/BUSINESS PROPERTY INCLUDED IN PURCHASE PRICE (i.e., furniture, farm equipment, machinery, etc.)** (other than a manufactured home subject to local property tax)? ☐ Yes ☐ No

If yes, enter the value of the personal/business property included in the purchase price \$ \_\_\_\_\_ (Must attach itemized list.)

**D. IS A MANUFACTURED HOME INCLUDED IN PURCHASE PRICE?** ☐ Yes ☐ No

If yes, how much of the purchase price is allocated to the manufactured home? \_\_\_\_\_

Is the manufactured home subject to local property tax? ☐ Yes ☐ No What is the decal number? \_\_\_\_\_

**E. DOES THE PROPERTY PRODUCE INCOME?** ☐ Yes ☐ No If yes, is the income from:

☐ Lease/Rent ☐ Contract ☐ Mineral rights ☐ Other (please explain): \_\_\_\_\_

**F. WHAT WAS THE CONDITION OF THE PROPERTY AT THE TIME OF SALE?**

☐ Good ☐ Average ☐ Fair ☐ Poor

Please explain the physical condition of the property and provide any other information (such as restrictions, etc.) that would assist the Assessor in determining the value of the property: \_\_\_\_\_

**CERTIFICATION**

**OWNERSHIP TYPE ( )**

Proprietorship ☐

Partnership ☐

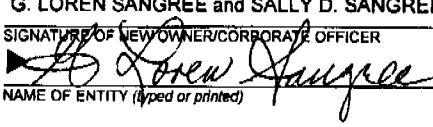
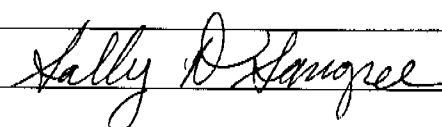
Corporation ☐

Other ☐

I certify that the foregoing is true, correct and complete to the best of my knowledge and belief.  
This declaration is binding on each and every co-owner and/or partner.

**NAME OF NEW OWNER/CORPORATE OFFICER**  
G. LOREN SANGREE and SALLY D. SANGREE

**TITLE**  
Trustees

**SIGNATURE OF NEW OWNER/CORPORATE OFFICER**  
 

**DATE**  
12-4-2009

**NAME OF ENTITY (typed or printed)**

**FEDERAL EMPLOYER ID NUMBER**

**ADDRESS (typed or printed)**  
6411 Ringo Circle, Huntington Beach, CA 92647

**PHONE NUMBER (8 a.m. - 5 p.m.)**  
(714) 846-2104

**E-MAIL ADDRESS (optional)**

(Note: The Assessor may contact you for additional information.)

If a document evidencing a change of ownership is presented to the recorder for recordation without the concurrent filing of a preliminary change of ownership report, the recorder may charge an additional recording fee of twenty dollars (\$20).

The foregoing instrument was acknowledged by **G. LOREN SANGREE & SALLY D. SANGREE** who personally appeared and are known to me to be the identical individuals described in and who executed the within instrument and acknowledged to me that they executed the same freely and voluntarily before me, the undersigned, a Notary Public in and for said County and State, this \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

Notary Public for ~~Oregon~~ **CALIFORNIA**  
My commission expires:

*G. Loren Sangree*

G. LOREN SANGREE

6/7/12

*Sally D. Sangree*

SALLY D. Sangree

6-7-12

SEE ATTACHED  
NOTARY

# CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

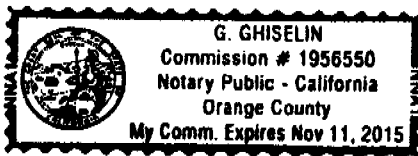
CIVIL CODE § 1189

State of California

County of Orange

On June 2, 2012 before me, G. Ghiselin Notary Public  
Date Here Insert Name and Title of the Officer

personally appeared G. LOREN AND SALLY D. SANGREE  
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.

Signature: G. Ghiselin Notary Public  
Signature of Notary Public

Place Notary Seal Above

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

☐ Corporate Officer — Title(s): \_\_\_\_\_

☐ Individual

☐ 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: \_\_\_\_\_

☐ Corporate Officer — Title(s): \_\_\_\_\_

☐ Individual

☐ Partner — ☐ Limited ☐ General

☐ Attorney in Fact

☐ Trustee

☐ Guardian or Conservator

☐ Other: \_\_\_\_\_

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

RIGHT THUMBPRINT  
OF SIGNER  
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