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NO PART OF ANY STEVENS-NESS FORM MAY BE REP

2013-011702

Klamath County, Oregon



00143796201300117020010019

10/16/2013 11:07:26 AM

Fee: \$37.00

SPACE RESERVED
FOR
RECORDER'S USE

MICHAEL L. STRATTON
422 ELM ST. (BOX 621)
CHILOQUIN, OR. 97624

Owner's Name and Address

KAREN D. ISON
422 ELM ST. (BOX 621)
CHILOQUIN, OR. 97624

Beneficiary's Name and Address

After recording, return to (Name and Address):

MICHAEL STRATTON
BOX 621
CHILOQUIN, OR. 97624

Until requested otherwise, send all tax statements to (Name and Address):

MICHAEL STRATTON
BOX 621
CHILOQUIN, OR. 97624

NOTICE TO OWNER: You should carefully read all information on this form. You may want to consult a lawyer before using this form. This form must be recorded before your death or it will not be effective. (Type or legibly print all information.)

TRANSFER ON DEATH DEED

KNOW ALL BY THESE PRESENTS that I, MICHAEL L. STRATTON

, owner of the real property described below,
whose address is 422 ELM ST. (BOX 621) CHILOQUIN, OR. 97624

upon my death, do hereby transfer to the beneficiary designated below, all of my right, interest and title in that certain real property,
with the tenements, hereditaments and appurtenances thereunto belonging or in any way appertaining, situated in
KLAMATH County, State of Oregon, described as follows (legal description of the property):

Lots 11 and 12, Block 13, CHILOQUIN DRIVE ADDITION to the City of Chiloquin, TOGETHER
WITH that portion of Elm Street, vacated lying South of and adjacent to said Lots 11 and 12,
EXCEPTING THEREFROM the North 35 feet of said Lots, conveyed to the City of Chiloquin, in Deed
recorded July 26, 1963 in Book 347, page 3, in the County of Klamath, State of Oregon.

Tax Account No: 3507-003AD-02900-000

Key No: 223172

(IF SPACE INSUFFICIENT, CONTINUE DESCRIPTION ON REVERSE)

I designate KAREN D. ISON

whose mailing address, if available, is BOX 61 CHILOQUIN, OR. 97624

as my primary beneficiary* if that person survives me.

(Optional) I designate SHAWN STRATTON

whose mailing address, if available, is 11621 Firmin Ridge Road
BERTHOOD, CO. 84513

as my alternate beneficiary** if that person survives me.

Before my death, I have the right to revoke this deed.

(Optional) SPECIAL TERMS:

In construing this instrument, where the context so requires, the singular includes the plural.

IN WITNESS WHEREOF, the undersigned has executed this instrument on

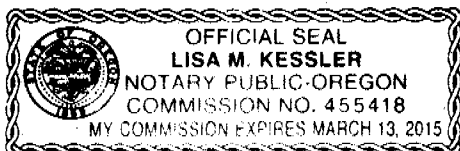
10-16-13

Michael L. Stratton

STATE OF OREGON, County of Klamath

ss.

This instrument was acknowledged before me on October 16, 2013
by Michael Lee Stratton.



Lisa M. Kessler
Notary Public for Oregon

My commission expires March 13, 2015

*ORS 93.961(2) states that a designated beneficiary must be identified by name; "a beneficiary designation that identifies beneficiaries only as members of a class is void."

**93.953(2)(b) states that an individual may designate one or more "Alternate beneficiaries who take the property only if none of the primary beneficiaries is qualified or survives the transferor."

NOTE: ORS 93 provides that Transfer on Death deeds: (a) Transfer only property that the transferor owns at time of death, may not transfer property to designated beneficiaries with right of survivorship, but may designate shares of ownership (93.969); (b) Are always revocable (93.955); (c) Must be recorded before death to be effective (93.961(1)(d)), but need not be delivered to designated beneficiaries (93.963(1)); (d) Transfer property without any warranties or covenants of title (93.969(4)), and subject to all debts of the decedent, as well as to all liens, mortgages and conveyances to which the property may be subject (93.969(2)).