

2014-011045

Klamath County, Oregon



00160489201400110450030032

10/22/2014 09:31:26 AM

Fee: \$52.00

GRANTOR NAME AND ADDRESS:

LaRue Siens
19699 S.W. Mountaineer Way Apt E. 225
Bend, OR 97702

Nancy Carroll Pierson
524 LaCumbre
Santa Barbara, CA 93102

GRANTEE NAME AND ADDRESS:

Robert K. Goeckner
22817 Beaver Street
Klamath Falls, OR 97601

AFTER RECORDING RETURN TO:

Neal G. Buchanan
Attorney at Law
435 Oak Avenue
Klamath Falls, OR 97601

UNTIL A CHANGE

SEND TAX STATEMENTS TO:
Robert K. Goeckner
22817 Beaver Street
Klamath Falls, OR 97601

QUITCLAIM DEED - STATUTORY FORM

LERUE SEINS AND NANCY CARROLL PIERSON, not as tenants in common but with rights of survivorship, **Grantors**, quitclaim to **ROBERT K. GOECKNER, Grantee**, all their interest in the following described real property situated in Klamath County, Oregon, to-wit:

Lot 10 in Block 8 of FOX HOLLOW, according to the official plat thereof on file in the office of the County Clerk of Klamath County, Oregon

The true and actual consideration for this conveyance is \$0. However, the actual consideration consists of or includes property or value given or promised which is the whole consideration, being to clear title.

"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 AND 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 QUITCLAIM DEED - Page 1

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

DATED this _____ day of _____, 2014.

Larue Siens
LARUE SIENS, GRANTOR

Nancy Carroll Pierson
NANCY CARROLL PIERSON

STATE OF OREGON, County of Deschutes) ss.

On the 14 day of Oct, 2014 before me, the undersigned, a Notary Public in and for said State, personally appeared **LARUE SIENS**, and acknowledged to me that she executed the same as her voluntary act and deed.



Juanita M Hyde
NOTARY PUBLIC FOR OREGON
My Commission Expires: 6/20/2016

STATE OF CALIFORNIA, County of _____) ss:

Nancy Carroll Pierson 2014 before me, _____ personally appeared **NANCY CARROLL PIERSON**, who proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to the within instrument and acknowledged to me that she executed the same in her authorized capacities, and that by her signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument.

I certified 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.

NOTARY PUBLIC FOR CALIFORNIA

See Attached California Acknowledgment

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT
CIVIL CODE § 1189

State of California

County of Santa Barbara }

On October 3, 2014 before me, Malia L. Speciale, Notary Public
Date Here Insert Name and Title of the Officer

personally appeared Nancy Carroll Person
Name(s) of Signer(s)



Place Notary Seal Above

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: Malia L. Speciale
Signature of Notary Public

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended 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): _____
 Partner — Limited General
 Individual Attorney in Fact
 Trustee Guardian or Conservator
 Other: _____

Signer's Name: _____
 Corporate Officer — Title(s): _____
 Partner — Limited General
 Individual Attorney in Fact
 Trustee Guardian or Conservator
 Other: _____

Signer Is Representing: _____

Signer Is Representing: _____