

2014-012412

Klamath County, Oregon

BL

NO PART OF ANY STEVENS-NESS FORM MAY BE REPROD



00162127201400124120010013

12/01/2014 02:16:28 PM

Fee: \$42.00

Sharon E. Redd

PO Box 6433

Eureka CA 95502

Owner's Name and Address

Cindy E Redd, Julie Brown &amp; Michelle Krupa

Beneficiary's Name and Address

After recording, return to (Name and Address):

Sharon E. Redd

po Box 6433

Eureka CA 95502

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

Sharon E. Redd

PO Box 6433

Eureka CA 95502

SPACE RESERVED  
FOR  
RECORDER'S USE

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, \_\_\_\_\_

Sharon E. Redd

\_\_\_\_\_, owner of the real property described below,

whose address is PO Box 6433, Eureka, CA 95502

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):

Parcel 1: Lot 3 in Block 11 of TRACT NO. 1064, FIRST ADDITION TO GATEWOOD, according to the official plat thereof on file in the office of the County Clerk of Klamath County, Oregon.

Parcel 2: Lot 12 in Block 3 of TRACT NO. 1007 - WINCHESTER, according to the official plat thereof on file in the office of the County Clerk of Klamath County, Oregon.

(IF SPACE INSUFFICIENT, CONTINUE DESCRIPTION ON REVERSE)

I designate Cindy E. Redd, Julie A. Brown and Michelle L. Krupa, each as to an undivided 1/3 interest

whose mailing address, if available, is \_\_\_\_\_

as my primary beneficiary\* if that person survives me.

(Optional) I designate \_\_\_\_\_

whose mailing address, if available, is \_\_\_\_\_

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

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

(Optional) SPECIAL TERMS: \_\_\_\_\_

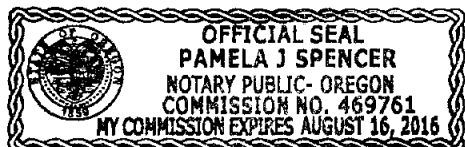
In construing this instrument, where the context so requires, the singular includes the plural.

IN WITNESS WHEREOF, the undersigned has executed this instrument on November 28, 2014

STATE OF OREGON, County of Klamath \_\_\_\_\_) ss.

This instrument was acknowledged before me on November 28, 2014

by Sharon E. Redd



Notary Public for Oregon

My commission expires 8/16/16

\*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)).