



2014-012961

Klamath County, Oregon

12/16/2014 11:36:09 AM

Fee: \$52.00

After recording return to:

National Residential Nominee Services

10125 Crosstown Circle, Ste #380

Eden Prairie, MN 55344

Name, Address, Zip

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

same as above

Name, Address, Zip

730332 70106

WARRANTY DEED - STATUTORY FORM (INDIVIDUAL)

Alexander Wilkens and Jennifer Wilkens, husband and wife

Grantor, conveys and warrants to
National Residential Nominee Services Inc.
of 10125 Crosstown Circle, Suite 380 Eden Prairie, MN 55344

Grantee, the following described real property free of encumbrances except as specifically set forth herein:

Lot 7, Block 5 of TRACT 1003, THIRD ADDITION TO MOYINA, according to the official plat thereof on file in the office of the County Clerk of Klamath County, Oregon.

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. 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, 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.

Subject to and excepting: Covenants, Conditions, Restrictions, Reservations, set back lines, Power of Special Districts, and Easements of Record, if any.

The true consideration for this conveyance is \$ 179,250.00. (Here comply with the requirements of ORS 93.030*).

5200

Dated this 17th day of May 2014; if a corporate grantor, it has caused its name to be signed by order of its board of directors.

Alexander Wilkens
Alexander Wilkens

Jennifer Wilkens
Jennifer Wilkens

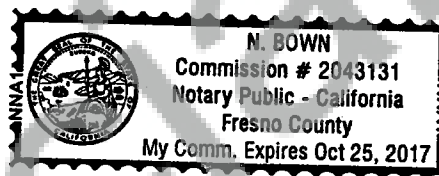
STATE OF ~~OREGON~~ CALIFORNIA
County of Fresno)ss.

Personally appeared on May 17, 2014 the above named Alexander Wilkens
A MARRIED MAN
acknowledged the foregoing instrument to be his/her voluntary act and deed.

Before me: N. BOWN

N. Bown
Notary Public for ~~Oregon~~ California

My commission expires: 10-25-17



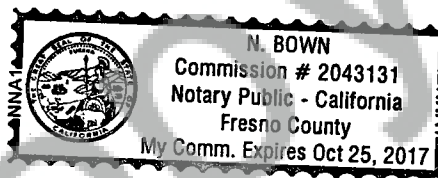
STATE OF ~~OREGON~~ CALIFORNIA
County of Fresno)ss.

Personally appeared on May 17, 2014 the above named Jennifer Wilkens
A MARRIED WOMAN
acknowledged the foregoing instrument to be his/her voluntary act and deed.

Before me: N. BOWN

N. Bown
Notary Public for ~~Oregon~~ CALIFORNIA

My commission expires: 10-25-17



* If the consideration consists of or includes other property or value, add the following:

"The actual consideration consists of or includes other property or value given or promised which is part of the whole consideration (indicate which)".

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

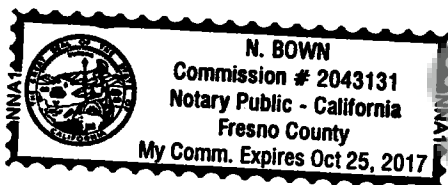
State of California

County of Fresno

On May 17, 2014 before me, N. BOWN, Notary Public

personally appeared ALEXANDER WILKENS AND
JENNIFER WILKENS

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: N. BOWN

Signature of Notary Public

Place Notary Seal and/or Stamp 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: _____

Signer's Name: _____

☐ Corporate Officer — Title(s): _____

☐ Corporate Officer — Title(s): _____

☐ Individual

☐ Individual

☐ Partner — ☐ Limited ☐ General

☐ Partner — ☐ Limited ☐ General

☐ Attorney in Fact

☐ Attorney in Fact

☐ Trustee

☐ Trustee

☐ Guardian or Conservator

☐ Guardian or Conservator

☐ Other: _____

☐ Other: _____

Signer Is Representing: _____

Signer Is Representing: _____

RIGHT THUMBPRINT
OF SIGNER
Top of thumb here

RIGHT THUMBPRINT
OF SIGNER
Top of thumb here