

2015-006166

Klamath County, Oregon



00171018201500061660030039

06/12/2015 12:48:56 PM

Fee: \$52.00

CYNTHIA JOHNSON, Claiming Successor  
Estate of PAMELA KATHLEEN PIMENTAL, Grantor  
JESSE DILLON PIMENTAL, Grantee

After recording return to:

Donald R. Crane  
Attorney at Law  
37070 Highway 62  
Chiloquin, OR 97624

Until a change is requested, all tax statements  
must be sent to the following address:

Jesse Dillon Pimental  
490 Fortress Blvd., Apt. 14G  
Murfreesboro, TN 37128

#### DEED OF CLAIMING SUCCESSOR

Cynthia Johnson, the duly qualified, and acting claiming successor of the small estate of Pamela Kathleen Pimental, deceased, in Klamath County Circuit Court Case No. 1501316CV, grantor, hereby conveys to Jesse Dillon Pimental, grantee, that real property situated in Klamath County, Oregon, described as follows:

Lot 5, Block 17, KLAMATH FOREST ESTATES, in the County of Klamath,  
State of Oregon.  
Code 8 MAP 3510-14CO TL 200


This property is free from encumbrances except for those of record.

The true consideration for this conveyance is \$ None (Estate distribution).

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

ESTATE OF PAMELA KATHLEEN PIMENTAL

  
CYNTHIA JOHNSON,  
Claiming Successor, Grantor

STATE OF CALIFORNIA       )  
  ) ss.  
County of \_\_\_\_\_ )

This instrument was acknowledged before me on \_\_\_\_\_, 2015, by Cynthia Johnson, claiming successor.

See attached CA Notary Certificate 

\_\_\_\_\_  
Notary Public for California  
My commission expires: \_\_\_\_\_

Prepared by:  
DONALD R. CRANE, OSB #640207  
Attorney at Law  
37070 Highway 62  
Chiloquin, OR 97624  
Tel. (541) 783-7725 / Fax. (541) 783-2245  
Email: [doncrane7@gmail.com](mailto:doncrane7@gmail.com)  
Attorney for Claiming Successor

**CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT**

**CIVIL CODE § 1189**

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California

County of Contra Costa )

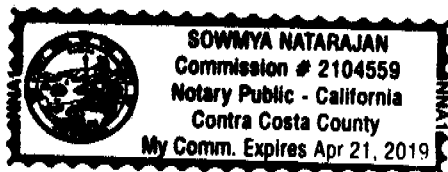
On June 8, 2015 before me, Sowmya Natarajan, Notary Public  
Date Here Insert Name and Title of the Officer

personally appeared Cynthia Johnson  
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 Sowmya Natarajan  
Signature of Notary Public

Place Notary Seal Above

**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 Is Representing: \_\_\_\_\_

Signer's Name: \_\_\_\_\_

- ☐ Corporate Officer — Title(s): \_\_\_\_\_  
☐ Partner — ☐ Limited ☐ General  
☐ Individual ☐ Attorney in Fact  
☐ Trustee ☐ Guardian or Conservator  
☐ Other: \_\_\_\_\_

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