## 2015-013141

Klamath County, Oregon



12/04/2015 02:47:14 PM

Fee: \$52.00

Kimball L. Wallis PO Box 249 St Paul, OR 97137-0249

After recording, return to:

Until a change is requested, send all tax statements and notices to:

Kimball and Joanne Wallis PO Box 249 St Paul, OR 97137-0249

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## STATUTORY WARRANTY DEED

This spac

Steven Bryan Spehling and Susan L. Spehling, Grantors, convey and warrant to Kimball L. Wallis and Joanne K. Wallis, husband and wife, Grantees, the following described real property in Klamath County, Oregon free of liens and encumbrances, except as specifically set forth herein:

SPRAGUE RIVER VALLEY ACRES, BLOCK 24, LOT 25, according to the official plat thereof on file in the office of the County Clerk, Klamath County, Oregon. (Assessor # R362342 Map Tax Lot # R-3613-006D0-04500-000)

Subject to:

1. Covenants, conditions, restrictions and/or easements, if any, affecting title, which may appear in the public record, including those shown on any recorded plat or survey.

The true and actual consideration paid for this transfer, stated in terms of dollars, is \$3,200.00.

BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON TRANSFERING 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 OF 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 TRANSFERRED IS A LAWFULLY ESTABLISHED LOT OR PARCEL, AS DEFINED IN ORS 92.010 OR 215.010, TO VERIFY THE APPOVED 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 OF 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.

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Spehling to Wallis

Dated this 19th day of Novemby1, 2015. STEVEN BRYAN SPEHLIN SUSAN L SPEHLING 1934 SOUTH OLD STAGE ROAD, SP. #78 MT. SHASTA, CA 96067 **ACKNOWLEDGMENT** State of California ) ) County of \_\_, 20\_\_\_\_, before me On personally appeared Steven Bryan Spehling and Susan L. Spehling, who proved to me on the basis of satisfactory evidence to be the person(s) whese 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. \* please see updated 2015 Notary Acknowledgment attached. Mag Notary Public

## CALIFORNIA ALL- PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

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 Siskiyon }

On NOV. 19, 2015 before me, Monica Grossman, Notary Public

personally appeared <u>Steven Bryan Spehling</u> & <u>Susan L. Spehling</u>, 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/(hey) 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.

Notary Public Signature

(Notary Public Seal)

MONICA GROSSMAN Commission # 2105819

Notary Public - California Siskiyou County / Comm. Expires Apr 5, 2019

INSTRUCTIONS FOR COMPLETING THIS FORM ADDITIONAL OPTIONAL INFORMATION This form complies with current California statutes regarding notary wording and, if needed, should be completed and attached to the document. Acknowledgments DESCRIPTION OF THE ATTACHED DOCUMENT from other states may be completed for documents being sent to that state so long as the wording does not require the California notary to violate California notary law. (Title or description of attached document) · State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment. • Date of notarization must be the date that the signer(s) personally appeared which (Title or description of attached document continued) must also be the same date the acknowledgment is completed. The notary public must print his or her name as it appears within his or her Number of Pages \_\_\_\_\_ Document Date\_ commission followed by a comma and then your title (notary public). Print the name(s) of document signer(s) who personally appear at the time of notarization Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. CAPACITY CLAIMED BY THE SIGNER he/she/they, is /are ) or circling the correct forms. Failure to correctly indicate this Individual (s) information may lead to rejection of document recording. Corporate Officer The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a (Title) sufficient area permits, otherwise complete a different acknowledgment form. · Signature of the notary public must match the signature on file with the office of Partner(s) the county clerk. □ Attorney-in-Fact Additional information is not required but could help to ensure this Trustee(s) acknowledgment is not misused or attached to a different document.  $\mathbf{O}$ Indicate title or type of attached document, number of pages and date. Other Indicate the capacity claimed by the signer. If the claimed capacity is a -0corporate officer, indicate the title (i.e. CEO, CFO, Secretary). · Securely attach this document to the signed document with a staple. 2015 Version www.NotaryClasses.com 800-873-9865