

2016-000949 Klamath County, Oregon 01/29/2016 02:37:33 PM

Fee: \$52.00

THIS SPACE RESERVED FOR RECORDER'S USE

## STATUTORY WARRANTY DEED

Barbara Cross, Trustee of the George and Barbara Cross Trust, dated August 5, 2003,

Grantor(s), hereby convey and warrant to

86033AM

Jesse J. Withers,

Jesse J. Withers 2076 Lakeshore Dr. Klamath Falls, OR 97601

File No.

Grantee(s), the following described real property in the County of Klamath and State of Oregon free of encumbrances except as specifically set forth herein:

The N1/2 of Lot 14 in Block 3, ALTAMONT ACRES, according to the official plat thereof on file in the office of the County Clerk of Klamath County, Oregon. Excepting therefrom the Easterly 5 feet thereof, acquired by Klamath County in Deed Volume 348, page 589, Deed Records of Klamath County, Oregon

The true and actual consideration for this conveyance is \$ PURSUANT TO AN IRC 1031 TAX DEFERRED EXCHANGE ON BEHALF OF GRANTOR/GRANTEE.

The above-described property is free of encumbrances except all those items of record, if any, as of the date of this deed and those shown below, if any:



Page 2 Statutory Warranty Decd Escrow No. 86033AM

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.

Dated this 1-28- Miday of Almuary

George & Barbara Cross Trust, dated August 5, 2003

Barbara Cross, Trustee

County of

, 2016, before me, Johnathan C On this Zoth day of Tanuary Public in and for said state, personally appeared Barbara Cross, Trustee of the George and Barbara Cross Trust, known or identified to the to be the person(s) whose name(s)(is) are subscribed to the within Instrument and acknowledged to me that he slighthey executed same.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal the day and year in this certificate first above written.

Notary Public For the State of //d/1/5//11/6

Residing at 1045 Hilled Dr.

Commission Expires: August 6th 2019

See Attachment For Notary Seal

A notary public or other officer completing this certific document to which this certificate is attached, and not t	ate verifies only the identity of the individual who signed the he truthfulness, accuracy, or validity of that document.
State of California (1) (1) (1) (1) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2	hnathun Chao notary Public.
personally appeared Barbara_	Here Insert Name and Title of the Officer
	Name(s) of Signer(s)
	*
subsection to the within instrument and acknowled	evidence to be the person(s) whose name(s)(is/are reduced to me that he/she/they executed the same in his/he/their signature(s) on the instrument the person(s), cted, 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.
JOHNATHAN CHAC Commission # 2118911 Notary Public - California Steams County My Comm. Expires Aug 6, 2019	Signature of Notary Public
Place Notary Seal Above	
Though this section is optional, completing this	PTIONAL s information can deter alteration of the document or is form to an unintended document.
Description of Attached Document	
Title or Type of Document:	Document Date:
Number of Pages: Signer(s) Other The	an Named Above:
Capacity(ies) Claimed by Signer(s)	
Signer's Name:	Signer's Name:
Corporate Officer — Title(s):	☐ Corporate Officer — Title(s):
☐ Partner — ☐ Limited ☐ General	☐ Partner — ☐ Limited ☐ General
Individual Attorney in Fact	☐ Individual ☐ Attorney in Fact
☐ Trustee ☐ Guardian or Conservator ☐ Other:	Trustee Guardian or Conservator
Signer Is Representing:	_ Other:
	Signer Is Representing: