

2016-003948

Klamath County, Oregon

AFTER RECORDING RETURN TO:

Nathan J. Ratliff  
Ratliff & Ratliff, P.C.  
620 Main Street  
Klamath Falls OR 97601



00185251201600039480030038

04/19/2016 02:10:16 PM

Fee: \$52.00

GRANTOR'S NAME AND ADDRESS:

Robert H. Hart and Sammie F. Hart  
Trustees under the Hart Family Trust dated 08/06/04  
3024 Evelyn Avenue  
Simi Valley, CA. 93063

GRANTEE'S NAME AND ADDRESS:

Robert H. Hart and Sammie F. Hart, as trustees  
OF THE HART FAMILY TRUST, utd 08/06/04  
3024 Evelyn Avenue  
Simi Valley, CA. 93063

SEND TAX STATEMENTS TO:

No Change

QUITCLAIM DEED

KNOW ALL MEN BY THESE PRESENTS that **ROBERT H. HART and SAMMIE F. HART in the Trust as Trustees, or the Successor Trustee/s, under the Hart Family Trust dated August 6, 2004**, hereinafter called grantor, for the consideration hereinafter stated, does hereby remise, release and forever quitclaim unto **ROBERT H. HART and SAMMIE F. HART, as Trustees of THE HART FAMILY TRUST, utd August 6, 2004**, hereinafter called grantee, and unto grantee's heirs, successors and assigns, all of the grantor's right, title and interest 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, to-wit:

That portion of the N½ of the S½ of Section 4, Township 34 South, Range 7 East of the Willamette Meridian, lying Westerly of the center thread of Spring Creek, described as follows:

Beginning at a point in the South line of the N½ of the S½ of said Section 4, 2480 feet West of the Southwest corner of Lot 1, Block 5 (IDLEREST) which point is the Southwest corner thereof; thence North 719.8 feet more or less parallel with the West line of said Section 4, which point is the Northwest corner thereof; thence East 490 feet parallel to the North line of the N½ of the S½ of said Section 4, which point is the Northeast corner thereof; thence South 719.8 feet more or less parallel to the West line of said Section 4, which point is the Southeast corner thereof; thence West along the South line of the N½ of the S½ of said Section 4, 490 feet to the point of beginning.

To have and to hold the same unto grantee and grantee's heirs, successors and assigns forever.

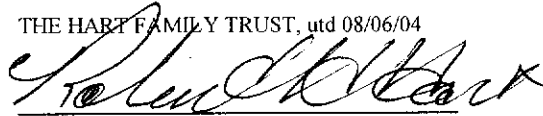
The true and actual consideration paid for this transfer, stated in terms of dollars, is \$0.00. However, the actual consideration consists of or includes other property or value given or promised which is the whole consideration: that is, for estate planning services.

IN WITNESS WHEREOF, the grantor has executed this instrument this 24<sup>th</sup> day of March, 2016

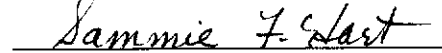
BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON TRANSFERRING FEE TITLE SHOULD INQUIRE ABOUT THE PERSON'S RIGHTS, IF ANY, UNDER ORS 195.300, 195.301 AND 195.305 TO 195.336 AND SECTIONS 5 TO 11, CHAPTER 424, OREGON LAWS 2007, SECTIONS 2 TO 9 AND 17, CHAPTER 855, OREGON LAWS 2009, AND SECTIONS 2 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, SECTION 2 TO 9 AND 17, CHAPTER 855,  
OREGON LAWS 2009, AND SECTION 2 TO 7, CHAPTER 8, OREGON LAWS 2010.

THE HART FAMILY TRUST, utd 08/06/04



Robert H. Hart, Trustee



Sammie F. Hart, Trustee

STATE OF CALIFORNIA )

) ss.

County of \_\_\_\_\_ )

On the \_\_\_\_\_ before me, \_\_\_\_\_  
DATE NAME, TITLE OF OFFICER - E.G., "JANE DOE, NOTARY PUBLIC."

personally appeared \_\_\_\_\_  
NAME(S) OF SIGNER(S)

personally known to me - OR - 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 that 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.

\_\_\_\_\_  
OF NOTARY SIGNATURE

**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 Ventura

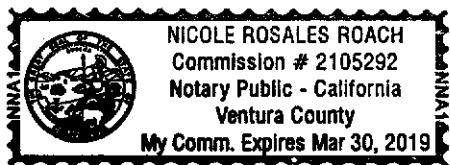
On March 24, 2014 before me, Nicole Rosales Roach,  
Date Here Insert Name and Title of the Officer

personally appeared Robert H. Hart and  
Name(s) of Signer(s)  
Sammie F. Hart

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 [Signature]  
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: Quitclaim Deed Document Date: 3/24/14  
Number of Pages: 2 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: \_\_\_\_\_