Recording Requested By

And when recorded mail to:

Name Thomas W. Mackay
Street
Address 640 Mill Rd
City
State
Zip Auburn CA

2016-009245 Klamath County, Oregon

08/30/2016 09:35:03 AM

Fee: \$47.00

95603	
OTTS FORMS, INC.	SINCE
GRANT DEED	DOCUMENTARY TRANSFER TAX \$ ☐ computed on full value of property conveyed, or ☐ computed on full value less liens and encumbrances remaining at time of sale.
FOR VALUABLE CONSIDERATION, receipt of which is hereb	Autograph of Declarant or Agent Determining Tax Firm Name by acknowledged, IME, Leslie John Silva
	of grantor(s))
grant to Thomas W. M. (Name)	Ackay of grantee(s))
laaaallaad oo follossoo	, County of Klamath, State of Orego
Lot 14 in Block 32 of Klamath Falls Plat No.2, according to the offi of the County Clerk of Klamath	s Forest Estates, Highway 66 Unit, icial Plat there of on file in the office County Oregon.
ax Account No: , 3811-00400-00	100-000 key No.: 460398
ax Account No:, 38i/-004co-00 assessor's parcel No. <u>NA</u> executed on <u>August 24</u> , <u>2016</u> , in the City	100-000 key No.: 460398
C \times A C	of Auburn, State of CA
County of	of Aubarn , State of CA See attached California All-Purpose Acknowledgment dated 8-2006
CX A CCOUNT NO:, 381/-004C0-00 Assessor's parcel No	of Aubarn Seleca See attached California All-Purpose Acknowledgment
Assessor's parcel No	See attached California All-Purpose Acknowledgment dated Services Person(s) whose name(s) that he/she/they executed er/their signature(s) on the State of CA CAPACITY CLAIMED BY SIGNER(S) Individual(s) Corporate Officer(s) Partner(s) Attorney in Fact Truston
State of	See attached California All-Purpose Acknowledgment dated S - State of CA CAPACITY CLAIMED BY SIGNER(S) Individual(s) Corporate Officer(s) Partner(s) Partner(s) Partner(s) Attorney in Fact Trustee Guardian/Conservator
State of	See attached California All-Purpose Acknowledgment dated S— Submitted Capacity CLAIMED By Signer(s) Individual(s) Corporate Officer(s) Partner(s) Individual(s) Corporate Officer(s) Individual(s) In
State of	See attached California All-Purpose Acknowledgment dated S— Submitted Capacity CLAIMED By Signer(s) Individual(s) Corporate Officer(s) Partner(s) Individual(s) Corporate Officer(s) Individual(s) In

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Rev. 11-07

CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

A notary 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.

<u></u>		
STATE OF CALIFORNIA } COUNTY OF PLACER }		
On <u>8/24/20/6</u> before me,	Lori S. Johnson Notary Public,	
personally appeared	Name(s) of Signer(s)	
LORI S. JOHNSON NOTARY PUBLIC - CALIFORNIA COMMISSION # 2118313 PLACER COUNTY My Comm. Exp. July 4, 2019	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.	
Place Notary Seal Above	Signature of Notary Public	
——————————————————————————————————————		
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: 8/2/60/6 Numb	per of Pages: 1 (2 w) acknowledge mont,	
Signer(s) Other Than Named Above:		