

#### 2016-009329

Klamath County, Oregon 08/31/2016 03:45:00 PM

Fee: \$102.00

#### THIS SPACE RESERVED FOR RECORDER'S USE

After recordi	ng return to:	
Francisco D	e Dios and Adelaida De Dios	
11782 Reva	Drive	
Garden Gro	ve, CA 92840	
Until a chang	e is requested all tax statements	
shall be sent to the following address:		
Francisco De Dios and Adelaida De Dios		
11782 Reva	Drive	
Garden Gro	ve, CA 92840	
File No.	120485AM	

#### STATUTORY WARRANTY DEED

Edward E. Colson, III, Trustee of the Edward E. Colson, III Trust Agreement, dated January 12, 1995, as to an undivided 19% interest

Karen Jeanne Colson, a married woman, as her sole and separate property, as to an undivided 11.5%

Dennis R. Sciotto and Carol Ann Sciotto, Trustees the Dennis R. Sciotto and Carol Ann Sciotto Community Property Trust Agreement dated January 9, 2002, as to an undivided 23% interest

Greg R. Velasquez and Cynthia L. Velasquez, Trustees of the C & G Velasquez Family Trust dated October 19, 2005, as to an undivided 29% interest

Dennis R. Sciotto, Trustees of the Dennis R. Sciotto Family Trust Agreement dated December 19, 1994 as to an undivided 7.5% interest

Edward E. Colson, IV, a single man, as to an undivided 5% interest

And Dennis J. Sciotto and Cynthia Sciotto, husband and wife, as to an undivided 5% interest

as Tenants in Common,

Grantor(s), hereby convey and warrant to

Francisco De Dios and Adelaida De Dios, Tenants by the Entirety

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:

Lots 2, 3, 4, 5, 17 and 18, of the Re-Subdivision of Lot 803, ENTERPRISE TRACTS, according to the official plat thereof on file in the office of the County Clerk of Klamath County, Oregon, SAVING AND EXCEPTING those portions deeded to State of Oregon by and through its State Highway Commission by deed recorded September 18, 1943 in Volume 158 on page 407, by deed recorded May 1, 1942 in Deed Volume 147 on page 104 and by deed recorded December 24, 1943 in Deed Volume 161 on page 42, Deed Records of Klamath County, Oregon.

The true and actual consideration for this conveyance is \$275,000.00.

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:

2016-2017 Real Property Taxes, a lien not yet due and payable

Page 2 Statutory Warranty Deed Escrow No. 120485AM

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.

SECTIONS 2 TO 7, CHAPTER 8, OREGON LAWS	
Dated this 29 day of August, 2016.	
Edward E. Colson III Trust Agreement, dated January  By:  Edward E. Colson IIII Trustee	12, 1995
State of} ss County of	
known or identified to me to be the person(s) whose nethat he/she/they executed same.  IN WITNESS WHEREOF, I have hereunto set my han peritten.	a Notary Public in and for said state, of the Edward E. Colson, III Trust Agreement, dated January 12, 1995_ame(s) is/are subscribed to the within Instrument and acknowledged to med and affixed my official seal the day and year in this certificate first above
TYLESCO.	
Notary Public for the State of	See 1221

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 Ban Dieas	}
On 8-39-16 before me, E	aneiceT.ONealNotaryPublic.
personally appeared EdNary	(Here insert name and title of the officer)
	actory evidence to be the person(s) whose
name(s) is/are subscribed to the within	instrument and acknowledged to me that
he/stre/they executed the same in his/h	er/their authorized capacity(ies), and that by
which the person(s) acted, executed the	ent the person(s), or the entity upon behalf of einstrument.
<i>,</i> , , , , , , , , , , , , , , , , , ,	
I certify under PENALTY OF PERJURY	under the laws of the State of California that
the foregoing paragraph is true and cor	rect.
	SANSICE T. ONEAL Commission NO. 2008139
WITNESS my hand and official seal.	NOTARY PUBLIC CAUPORNIA S SAN DIEGO COUNTY
Manager Market M	Commission Emples February 22, 2019
Notary Public Signature (No.	otary Public Seal)
ADDITIONAL ODTIONAL INFORMATI	INSTRUCTIONS FOR COMPLETING THIS FORM
ADDITIONAL OPTIONAL INFORMATION OF THE ATTACHED DOCUMENT	if needed, should be completed and attached to the document. Acknowledgments
bedding specific real real persons.	from other states may be completed for documents being sent to that state so long as the wording does not require the California notary ta violate California notary
(Title or description of attached document)	<ul> <li>State and County information must be the State and County where the document</li> </ul>
Triangle of the standard of th	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
CAPACITY CLAIMED BY THE SIGNER	notarization.  • Indicate the correct singular or plural forms by crossing off incorrect forms (i.e.
☐ Individual (s)	he/she/they, is /are ) or circling the correct forms. Failure to correctly indicate this 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  constant of the product of the produ
(Title) ☐ Partner(s)	sufficient area permits, otherwise complete a different acknowledgment form.  • Signature of the notary public must match the signature on file with the office of
☐ Attorney-in-Fact	the county clerk.  Additional information is not required but could help to ensure this
Trustee(s)	acknowledgment is not misused or attached to a different document.

Indicate title or type of attached document, number of pages and date.

corporate officer, indicate the title (i.e. CEO, CFO, Secretary).

· Securely attach this document to the signed document with a staple.

Indicate the capacity claimed by the signer. If the claimed capacity is a

2015 Version www.NotaryClasses.com 800-873-9865

Other.

Page 3 Statutory Warranty Deed Escrow No. 120485AM
Dated this day of August, 2016
Karen Jeanne Colson
State of} ss County of
On this day of August, 2016, before me, a Notary Public in and for said state, personally appeared Karen Jeanne Colson_, known or identified to me to be the person(s) whose name(s) is/are subscribed to the within Instrument and acknowledged to me that he/she/they 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

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 8an Oieaa	}
Ooung or <u>wants</u>	· · · · · · · · · · · · · · · · · · ·
On 8 - 34 - 16 V before me,	(Here inspert name and title of the officer)
personally appeared Karen	<u>jeanne Colson III.</u> ,
who proved to me on the basis of satisfa	actory evidence to be the person(\$) whose
name(s) is/are subscribed to the within	instrument and acknowledged to me that
he/she/they executed the same in his/hi	er/their authorized capacity(ies), and that by
his/her/their signature(s) on the instrum	ent the person(s), or the entity upon behalf of
which the person(s) acted, executed the	instrument.
1	
Landiff under DENALTY OF DED HIPV	under the laws of the State of California that
· ·	
the foregoing paragraph is true and cor	CCC.
	FANEKET ONLY
WITNESS my hand and official seal.	Commission No. 2096139 S NOTARY PUBLIC - CALIFORNIA S
J. Jan.	Commission Expres February 22, 2019
- XAV/A/O./5.0411MAF2	Committee of the Commit
Notary Public Signature (No	otary Public Seal)
<b>*</b>	•
ADDITIONAL OPTIONAL INFORMATI	ON INSTRUCTIONS FOR COMPLETING THIS FORM
DESCRIPTION OF THE ATTACHED DOCUMENT	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)	<ul> <li>State and County information must be the State and County where the document</li> </ul>
	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.
Number of Pages Document Date	<ul> <li>The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public).</li> </ul>
Number of ages	• 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/shc/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	<ul> <li>The notary seal impression must be clear and photographically reproducible.</li> <li>Impression must not cover text or lines. If seal impression smudges, re-seal if a</li> </ul>
(Title)	sufficient area permits, otherwise complete a different acknowledgment form.
☐ Partner(s)	Signature of the notary public must match the signature on file with the office of 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.

Indicate title or type of attached document, number of pages and date.

corporate officer, indicate the title (i.e. CEO, CFO, Secretary)

· Securely attach this document to the signed document with a staple.

Indicate the capacity claimed by the signer. If the claimed capacity is a

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Other\_

Dated this day of August, 2016.
Dennis R. Sciotto and Carol Ann Sciotto Community Property Trust Agreement dated January 9, 2002  Dennis R. Sciotto, Trustee  Carol Ann Sciotto, Trustee
State of
Notary Public for the State of

Page 4 Statutory Warranty Deed Escrow No. 120485AM

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.

and not the truthumess, accuracy, or vain	uity of that document.
State of California }	
County of Gan Diego }  On 8-30-16 before me, Tole personally appeared Dennis R.Sc. who proved to me on the basis of satisfact name(s) is/are subscribed to the within ins he/she/they executed the same in his/her/their signature(s) on the instrument which the person(s) acted, executed the instrument of the same in the same in the same in the same which the person(s) acted, executed the instrument of the same in t	trument and acknowledged to me that their authorized capacity(ies), and that by the person(s), or the entity upon behalf of
the foregoing paragraph is true and correct WITNESS my hand and official seal.	FANESCE T. ONEAL Commission No. 2098139 NOTARY PUBLIC - CALIFORNIA SAN DIEGO COUNTY Commission Excess February 22, 2019
* ADDITIONAL OPTIONAL INFORMATION	
DESCRIPTION OF THE ATTACHED DOCUMENT	if needed, should be completed and attached to the document. Acknowledgments 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)  (Title or description of attached document continued)	<ul> <li>State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment.</li> <li>Date of notarization must be the date that the signer(s) personally appeared which</li> </ul>
Number of Pages Document Date	<ul> <li>must also be the same date the acknowledgment is completed.</li> <li>The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public).</li> <li>Print the name(s) of document signer(s) who personally appear at the time of notarization.</li> </ul>
CAPACITY CLAIMED BY THE SIGNER  Individual (s) Corporate Officer  (Title) Partner(s)	<ul> <li>Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/she/they, is /are) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording.</li> <li>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 sufficient area permits, otherwise complete a different acknowledgment form.</li> <li>Signature of the notary public must match the signature on file with the office of the county clerk.</li> </ul>

Additional information is not required but could help to ensure this

Indicate the capacity claimed by the signer. If the claimed capacity is a

acknowledgment is not misused or attached to a different document.

Indicate title or type of attached document, number of pages and date.

corporate officer, indicate the title (i.e. CEO, CFO, Secretary).

Securely attach this document to the signed document with a staple.

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Attorney-in-Fact

Trustee(s)

Other

Page 5 Statutory Warranty Deed Escrow No. 120485AM
Dated this Z day of August, 2016
$m{k}$ , $m{k}$
C & G Velasquez Family Trust dated October 19, 2005
By: 177004755
Greg R. Velasquez, Trustee
By: A Devote
Cynthia L. Velasquez, Prinstea
State of
County of Alass Alass As
On this 24 day of August, 2016, before me, 2444 Man a Notary Public in and for said state,
bergousn'y appeared Oreg R. A classifier and Chittis F. Actasifier i trastees of the C & O Actasifier Lamith Little October.
19, 2005, known or identified to me to be the person(s) whose name(s) is/are subscribed to the within Instrument and
acknowledged to me that he/she/they 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.
, A
Genelag Kyran
Notary Public for the State of Cally 10 2 10 10 10 10 10 10 10 10 10 10 10 10 10
Residing at: Commission # 2059231 Commission Expires: 2 2 2 2 0 8  Residing at: Commission # 2059231  Residing at: Commission # 2059231
Z V Lan Dieno County
My Comm. Expires Mar 22, 2016

Page 6 Statutory Warranty Deed Escrow No. 120485AM	
Dated thisday of August, 2016	
Dennis R. Sciotto Family Trust agreement dated December 19, 19  By	94
State of} ss County of	
On this day of August, 2016, before me,	re subscribed to the within Instrument and acknowledged to me
Notary Public for the State of	Missipped  Altisopped

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 San Oir Go	
On $8-39-16$ before me,	ONFICET ON MINTERS THE OFFICE OF THE OFFICE OFFICE OF THE OFFICE OF THE OFFICE OFFICE OF THE OFFICE OF THE OFFICE OFFICE OF THE OFFICE OFFICE OF THE OFFICE OF THE OFFICE OF THE OFFICE OFFICE OF THE
name(s) is/age subscribed to the within in he/she/they executed the same in his/he	sctory evidence to be the person(s) whose instrument and acknowledged to me that er/their authorized capacity(ies), and that by ent the person(s), or the entity upon behalf of instrument.
I certify under PENALTY OF PERJURY the foregoing paragraph is true and corr	under the laws of the State of California that rect.
WITNESS my hand and official seal.  Hong Company Company Public Signature (No.	SAMEICE T. O'NEAL Commission Re. 2096139 SOTARY FURLIC - CALIFORNIA D SAM DIECO COUNTY Commission Excres February 22, 2019 tary Public Seal)
ADDITIONAL OPTIONAL INFORMATI	INSTRUCTIONS FOR COMPLETING THIS FORM
DESCRIPTION OF THE ATTACHED DOCUMENT	This form complies with current California statutes regarding notary wording and, if needed, should be completed and attached to the document. Acknowledgments 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.
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CAPACITY CLAIMED BY THE SIGNER  Individual (s) Corporate Officer  (Title) Partner(s) Attorney-in-Fact	<ul> <li>Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/she/hey- is /are) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording.</li> <li>The notary scal impression must be clear and photographically reproducible. Impression must not cover text or lines. If scal impression smudges, re-scal if a sufficient area permits, otherwise complete a different acknowledgment form.</li> <li>Signature of the notary public must match the signature on file with the office of the county clerk.</li> <li>Additional information is not required but could help to ensure this</li> </ul>
☐ Trustee(s)	acknowledgment is not misused or attached to a different document.  Indicate title or type of attached document, number of pages and date.

Indicate the capacity claimed by the signer. If the claimed capacity is a

corporate officer, indicate the title (i.e. CEO, CFO, Secretary).

· Securely attach this document to the signed document with a staple.

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Other

Page 7 Statutory Warranty Deed Escrow No. 120485AM

Dated this 24 day of August, 2016
Edward E. Colson IV
State of

Dated this day of August, 2016	
Dennis J. Sciotto	
Cynthia Stiotto	
State of} ss County of	
On this day of August, 2016, before me,	a Notary Public in and for said state, known or identified to me to be the person(s) whose name(s me that he/she/they executed same. ixed my official seal the day and year in this certificate first above
Notary Public for the State of	
Residing at: Commission Expires:	Gee Atached

Page 8 Statutory Warranty Deed Escrow No. 120485AM

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State of California	}
County of San Diego	<b>}</b>
On 8-35-16 before me, T	FanciceTONalNotacyPublic.
personally appeared Onnis Jen	(Here inseed name and title of the office)
who proved to me on the basis of satisfa	actory evidence to be the person(s) whose
name(s) js/are subscribed to the within	instrument and acknowledged to me that
his/her/their signature(s) on the instrument	er/their authorized capacity(ies), and that by ent the person(s), or the entity upon behalf of
which the person(s) acted, executed the	
	under the laws of the State of California that
the foregoing paragraph is true and con	FANERCE T ONEAL
WITNESS my hand and official seâl.	Commission No. 2098139 C
Samin dollar	SAN DIESO COUNTY Commission Express February 22, 2019
Notary Public Signature (No	tary Public Seal)
ADDITIONAL OPTIONAL INFORMATI	ON INSTRUCTIONS FOR COMPLETING THIS FORM
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Number of Pages Document Date	<ul> <li>The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public).</li> <li>Print the name(s) of document signer(s) who personally appear at the time of</li> </ul>
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CAPACITY CLAIMED BY THE SIGNER  Individual (s)	he/she/they- is /are ) or circling the correct forms. Pailure to correctly indicate this information may lead to rejection of document recording.
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(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
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☐ Trustee(s)	acknowledgment is not misused or attached to a different document.  Indicate title or type of attached document, number of pages and date.

Indicate the capacity claimed by the signer. If the claimed capacity is a

corporate officer, indicate the title (i.e. CEO, CFO, Secretary).

Securely attach this document to the signed document with a staple.

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Other