NO PART OF ANY STEVENS-NESS FORM MAY BE REPRODUCE

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09/13/2016 03:23:32 PM

Fee: \$47.00

Kevin R. Peck - Carol A. Peck
PO BOX 78736
Corona CA 92877
Richard Fowler
33217 Mountain Lakes Dr.
Klamath FALLS OR 97601
Grante's Name and Address After recording, return to (Name and Address):

KICHARD FUWLER

3-214 MOUNTAIN LAKES DV.

KIAMATH FAILS DR 97401 Until requested otherwise, send all tax statements to (Name a Cichard FOD ley 3311 Mountain Lakes by Riamath Falls OR 97601

SPACE RESERVED FOR RECORDER'S USE

KNOW ALL BY THESE PRESENTS that Kevin R. Peck & Carol A. Peck
hereinafter called grantor, for the consideration hereinafter stated, to grantor paid by Richard Fooler,
hereinafter called grantee, does hereby grant, bargain, sell and convey unto the grantee and grantee's heirs, successors and assigns, that certain real property, with the tenements, hereditaments and appurtenances thereunto belonging or in any way appertaining, situated in
Lot 67, Block 81, Klamath Falls Forest Estates. Hwy 66, Plat 4
(IF SPACE INSUFFICIENT, CONTINUE DESCRIPTION ON REVERSE) To Have and to Hold the same unto grantee and grantee's heirs, successors and assigns forever. And grantor hereby covenants to and with grantee and grantee's heirs, successors and assigns, that grantor is lawfully seized in fee simple of the above granted premises, free from all encumbrances except (if no exceptions, so state):
grantor will warrant and forever defend the premises and every part and parcel thereof against the lawful claims and demands of all persons whomsoever, except those claiming under the above described encumbrances. The true and actual consideration paid for this transfer, stated in terms of dollars, is \$ \(\frac{1}{2} \omega \) \(\text{\text{\$\sqrt{0}\$}} \) \(
- This instrument was acknowledged before me on,
This instrument was acknowledged before me on, by
as
of
(See attatched Tuest) Notary Public for Oregon My commission expires

PUBLISHER'S NOTE: If using this form to convey real property subject to ORS 92.027, include the required reference.

Attack and Description (Notary to proper or	akokokokokokokokokokokokokokokokokokoko
See Attached Document (Notary to cross ou See Statement Below (Lines 1-6 to be comp	
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Signature of Document Signer No. 1	Signature of Document Signer No. 2 (if any)
A notary public or other officer completing this cert document to which this certificate is attached, and n	tificate verifies only the identity of the individual who signed the of the truthfulness, accuracy, or validity of that document.
State of California County of Riverside	Subscribed and sworn to (or affirmed) before me on this
	by Date Month Year
C. RASSO	(and (2) Casel H Place), Name(s) of Signer(s)
Commission # 2025144 Notary Public - California Riverside County My Comm. Expires May 16, 2017	proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.
	Signature Wuse
	Signature of Notary Public
Seal Place Notary Seal Above	
Though this section is optional, completing to fraudulent reattachment of	OPTIONAL this information can deter alteration of the document or this form to an unintended document.
Description of Attached Document	Do compand Dates
	Document Date:
	Named Above:

CALIFORNIA JURAT WITH AFFIANT STATEMENT

GOVERNMENT CODE § 8202