RECORDED AT THE REQUEST OF: AmeriTitle 15/190 Am (do)

WHEN RECORDED MAIL TO:

2017-007810 Klamath County, Oregon 07/13/2017 10:22:00 AM

Fee: \$52.00

<u>Title Investments, Inc.</u> <u>P.O. Box 848</u> Healdsburg, CA 95448

SPACE ABOVE THIS LINE FOR RECORDER

Transfer and Assignment of Trust Deed

For valuable consideration, the receipt of which is hereby acknowledged, each of the undersigned, Jesse F. Taylor and Darcy E. Taylor, husband and wife, or the survivor thereof does hereby irrevocably set over, transfer, grant, convey and assign to Jennifer Honey and Albert G. Stoll, joint tenants with rights of survivorship and its successors and assigns all of the interest of the undersigned in that certain Trust Deed (the "Mortgage"), dated January 30, 2017, together with the Note it was given to secure, a first Note dated January 30, 2017 in the original amount of \$35,000.00 with respect to premises located at 17117 Freight Road Ln, Klamath Falls, OR 97601, lot or parcel number R487495, given by Wanda C. Wright, Trustee of the Wanda C. Wright Trust Created by That Certain Declaration of Trust Made The 14th Day of June 1999 to the undersigned and duly recorded on February 16, 2017 in the Office of the Recorder of Deeds of Klamath County, State of OR, Instrument No. 2017-001675, describing the land therein as:

Lot 15 in Block 15 of FIRST ADDITION TO KLAMATH RIVER ACRES, according to the official plat thereof on file in the office of the County Clerk, Klamath County, Oregon.

Together with note or notes therein described or referred to, the money due and to become due thereon, with interest, and all rights accrued or to accrue under said **Trust Deed**.

Witness the hand and seal of each of the undersigned, with the intent to be legally bound, this day of August 2017

Jesse F. Taylor

parcy E. Taylor/

ALL-PURPOSE ACKNOWLEDGMENT

State of ONEGON	
County of COD S	
On <u>7. /0. /7</u> before me,_	SAVOI L BROWN NAME OF NOTARY PUBLIC FRANKLIN TAYLOR NAME(S) OF SIGNERS(S)
personally appeared	PRANKLIN TAYLOR NAME(S) OF SIGNERS(S)
personally known to me OR prove	d 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 hespe/they executed the same in his per/their authorized capacity(ies), and that by his/ber/their signature(s) on the instrument
OFFICIAL STAMP SANDI L BROWN NOTARY PUBLIC-OREGON COMMISSION NO. 928968 MY COMMISSION EXPIRES JUNE 01, 2018	the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.
Place Notary Seal or Stamp Hero	WITNESS my hand and official seal. Signature of Notary
ATTENTION NOTARY: Although the information requested below is OPTIONAL, it may prove valuable to persons relying on this Acknowledgment and could prevent fraudulent reattachment of this certificate to another document.	
THIS CERTIFICATE MUST BE ATTACHED TO THE DOCUMENT DESCRIBED AT RIGHT	DESCRIPTION OF ATTACHED DOCUMENT TITLE OR TYPE OF DOCUMENT NUMBER OF PAGES 7. / 0, / / / / / / / / / / / / / / / / /

ALL-PURPOSE ACKNOWLEDGMENT

State of ONEGA	
State of ONBGING County of Cov	
On 7.10,17 before me,	NAME OF NOTARY PUBLIC
personally appeared DARCY NA	EVELYN TAYLOR AMBE(S) OF SICHERS(S)
	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 net/their authorized
OFFICIAL STAMP	capacity(ies), and that by his/fie)/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted,
SANDI L BROWN NOTARY PUBLIC-OREGON	executed the instrument.
COMMISSION NO 928969	
MY COMMISSION EXPIRES JUNE 01, 2018	
V	VITNESS my hand and official seal.
Place Notary Seal or Stamp Here	SIGNATURE OF NOTARY
	SIGNATURE OF NOTARY
ATTERITION NOTADY, Although the	information was add below in OPTIONAL it was a supplied by a supplied by
ATTENTION NOTARY: Although the information requested below is OPTIONAL, it may prove valuable to persons relying on this Acknowledgment and could prevent fraudulent reattachment of this certificate to another document.	
	DESCRIPTION OF ATTACHED DOCUMENT
	TITLE OR TYPE OF DOCUMENT
THIS CERTIFICATE	THE OR TYPE OF DOCUMENT
MUST BE ATTACHED TO THE DOCUMENT	NUMBER OF PAGES
DESCRIBED AT RIGHT	
DESCRIBES ATTRIBUTE	7. 10. 17 DATE OF DOCUMENT
	WA