S NO PART OF ANY STEVENS-NESS FORM MAY BE REPR

2017-010846
Klamath County, Oregon

00210572201700108460020025

09/25/2017 12:12:34 PM

Fee: \$47.00

SPACE RESERVED FOR RECORDER'S USE

MAILING ADD: 341 HILLSIDE AVE

LARSEN LANGA-GALBAVY, RONRAPRIL PALMER

329 HILLSIDE AVE. ICLAMATH FALLS
(PROPERTY) Grantor's Name and Address OR 9460)

LANGA LARSEN

341 HILLSIDE AVE. KLANGTH GALLS
Grantee's Name and Address OF 9460!

After recording, return to (Name and Address):

LANGA LARSEN

341 HILLSIDE AVE

VLAMATH FALLS, OR 9460!

Until requested otherwise, send all tax statements to (Name and Address):

LANGA LARSEN

341 HILLSIDE AVE

VLAMATH FALLS, OR 9460!

BARGAIN AND SALE DEED

KNOW ALL BY THESE PRESENTS that APRIL PALMER, LAURA LARSEN, AND
hereinafter called grantor, for the consideration hereinafter stated, does hereby grant, bargain, sell and convey unto LAURA

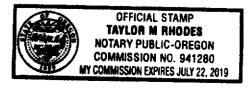
LARSEN AND RON R GARBAY
hereinafter called grantee, and unto grantee's heirs, successors and assigns, all of that certain real property, with the tenements, hereditaments and appurtenances thereunto belonging or in any way appertaining, situated in LAMATH COUNTY County,
State of Oregon, described as follows (legal description of property):

LOT IN BLOCK 4 OF DIXON ADDITION TO THE CITY OF KLAMATH FALLS, ACCORDING TO THE OFFICIAL PLAT THEREOF ON FILE IN THE OFFICE OF THE COUNTY CLERIC OF KLAMATH COUNTY DRECON

(IF-SPACE INSUFFICIENT, CONTINUE DESCRIPTION ON REVERSE)

In construing this instrument, where the context so requires, the singular includes the plural, and all grammatical changes shall be made so that this instrument shall apply equally to businesses, other entities and to individuals.

April Jalmer
Lama Farser
Ronald Ray Gellang



Notary Public for Oregon
My commission expires

WHY 27, 2019

	31/4/2/1/4/2		
A notary public or other officer completing this cert document to which this certificate is attached, and no			
State of California)		
County of Riverside)		
On Sunfamber 18, 2017 before me.	M.	Zintzun,	Notary Public
Date		Here Insert Name a	and Title of the Officer
On <u>September 18, 2017</u> before me, <u>Date</u> personally appeared <u>April Pale</u>	ner	*	
,		Name(s) of Signer(s))
who proved to me on the basis of satisfactors subscribed to the within instrument and acknowled his/her/their authorized capacity(ies), and that by or the entity upon behalf of which the person(s)	owled / his/l	ged to me that he/s ner/their signature(s)	she/they executed the same in on the instrument the person(s),
	of	certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph s true and correct.	
	W	TNESS my hand and	d officiąl seal.
M. ZINTZUN Commission # 2053577 Notary Public - California Riverside County My Comm. Expires Jan 23, 2018	Sig	nature <u>M</u> 3	ature of Notary Public
Though this section is optional, completing the		ormation can deter a	
fraudulent reattachment of th	nis for	m to an unintended	document.
Description of Attached Document Fitle or Type of Document: <u>bargace and S</u> Number of Pages: <u>/</u> Signer(s) Other Th	<u>Sale</u> nan N	<u>Deed</u> Documer amed Above: <u>La</u>	nt Date: <u>09/18/2017</u> uralarsen : Ron.K. Galk
Capacity(ies) Claimed by Signer(s)			
Signer's Name:		Signer's Name:	Title/e).
☐ Corporate Officer — True(s): ☐ Partner — ☐ Limited ☐ General		□ Corporate Officer □ Partner — □ Lim	
∃Individual ⊟ Attomey in Fact			☐ Attorney in Fact
☐ Trustee ☐ Guardian or Conservator			☐ Guardian or Conservator
Other:		□ Other: Signer Is Represent	ing:
SETTING THE TIME THE			

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