

#### THIS SPACE RESERVED FOR

2017-013092

Klamath County, Oregon

11/13/2017 02:19:24 PM Fee: \$52.00

After recording return to:
Donald Depuy and April Depuy
8706 Big Pine Way
Klamath Falls, OR 97601
Until a change is requested all tax statements shall be sent to the following address:  Donald Depuy and April Depuy
8706 Big Pine Way
Klamath Falls, OR 97601
File No. 202624AM

### STATUTORY WARRANTY DEED

## John H. Malone,

Grantor(s), hereby convey and warrant to

## Donald Depuy and April Depuy, as 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:

Lot 3 in Block 3, Tract 1161, High Country Ranch, according to the official plat thereof on file in the office of the County Clerk, Klamath County, Oregon.

The true and actual consideration for this conveyance is \$65,000.00.

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:

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.

Jahn & Malme John II. Malene
John M. Malone
State of } ss
County of}
On this day of November, 2017, before me, a Notary Public in and
for said state, personally appeared John H. Malone, known or identified to me to be the person(s) whose name(s) is/are
ref said said, personary appeared form it. Maione, known of 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.
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
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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
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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

See Attached For Correct California
Wording PRJ

Y R. JACKSON sion # 2051894 ueite - California rside County Expires Jan 11, 2018

# **ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT**

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 RIVOISIDE	n
On $\frac{ll/9/l7}{}$ before me, _	1953 R. Jackson, Notary Public (Here insert name and title of the officer)
personally appeared Tohn H	. Malore
	actory evidence to be the person(s) whose instrument and acknowledged to me that
he/she/they executed the same in his/ha	e <del>r/the</del> ir authorized capacity(jes), and that by
which the person(s) acted, executed the	ent the person(s), or the entity upon behalf of einstrument.
<b>, ,</b> , , , , , , , , , , , , , , , ,	
	under the laws of the State of California that
the foregoing paragraph is true and cor	Yanan ananan an an an an an an an an an a
WITNESS my hand and official seal.	PEGGY R. JACKSON  Gommission # 1151894
Tal Alekon	Notary Public - Ce Mornia Riverside County My Comm. Expires Jan 11, 2018
Notary Public Signature (No	otary Public Seal)
ADDITIONAL OPTIONAL INCORMATI	INSTRUCTIONS FOR COMPLETING THIS F
DESCRIPTION OF THE ATTACHED DOCUMENT	This form complies with current California statutes regarding notar if needed, should be completed and attached to the document. Ackno
Hatutory Warranty	other states may be completed for documents being sent to that state wording does not require the California notary to violate California
(Title or description of attached document)	<ul> <li>State and County information must be the State and County wher signer(s) personally appeared before the notary public for acknowled</li> </ul>
(Title or description of attached document continued)	<ul> <li>Date of notarization must be the date that the signer(s) personally a must also be the same date the acknowledgment is completed.</li> </ul>
Number of Pages 2 Document Date 1/9/17	The notary public must print his or her name as it appears wi commission followed by a comma and then your title (notary public must print his or her name as it appears with the notary public must print his or her name as it appears with his or her name
——————————————————————————————————————	Print the name(s) of document signer(s) who personally appear notarization.
CAPACITY CLAIMED BY THE SIGNER	Indicate the correct singular or plural forms by crossing off incorhe/she/they; is /are ) or circling the correct forms. Failure to correct
Individual (s)	information may lead to rejection of document recording.  The notary seal impression must be clear and photographically
	Impression must not cover text or lines. If seal impression smud
(Title) ☐ Partner(s)	sufficient area permits, otherwise complete a different acknowledge  Signature of the notary public must match the signature on file wi
☐ Attorney-in-Fact	the county clerk.  Additional information is not required but could help

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

Trustee(s)

Other\_

#### G THIS FORM

arding notary wording and, ment. Acknolwedgents from to that state so long as the te California notary law.

- County where the document for acknowledgment.
- personally appeared which apleted.
- appears within his or her (notary public).
- nally appear at the time of
- ing off incorrect forms (i.e. ure to correctly indicate this
- otographically reproducible. ession smudges, re-seal if a acknowledgment-form
- ire on file with the office of
  - could help to ensure this 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.