



THIS SPACE RESERVED FOR RECORDER'S USE

After recording return to:

William Freeman and Shirley Freeman

4200 Summers Lane #1

Klamath Falls, OR 97603

Until a change is requested all tax statements shall be
sent to the following address:

William Freeman and Shirley Freeman

4200 Summers Lane #1

Klamath Falls, OR 97603

File No. 233671AM

STATUTORY WARRANTY DEED

**Candace Lynn Nelson Successor Trustee of the Henry T. Holman Trust U.T.A.D. October 9, 1990
as to an undivided fifty percent (50%) interest**

and

**Kate Bekins Successor Trustee of the Patricia R. Holman Trust U.T.A.D. October 9, 1990
as to an undivided fifty percent (50%) interest,**

Grantor(s), hereby convey and warrant to

William Freeman and Shirley Freeman, 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 6, Block 2, SUNBURST ESTATES, 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 \$60,000.00.

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.

Dated this 7th day of May, 2018.

Patricia R. Holman Trust U.T.A.D. October 9, 1990

By: _____
Kate Bekins, Successor Trustee

Henry T. Holman Trust U.T.A.D. October 9, 1990

By: Candace Lynn Nelson, Trustee
Candace Lynn Nelson, Successor Trustee

State of _____ } ss
County of _____ }

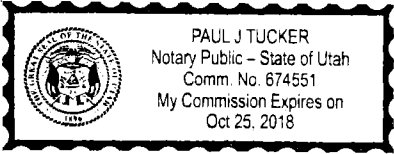
On this _____ day of May, 2018, before me, _____ a Notary Public in and for said state, personally appeared Kate Bekins, Successor Trustee of the Patricia R. Holman Trust, known or identified to me to be the person(s) whose name(s) is/are subscribed to the within Instrument and acknowledged to me that 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 _____
Residing at: _____
Commission Expires: _____

State of Utah } ss
County of Salt Lake }

On this 7th day of May, 2018, before me, Paul J. Tucker a Notary Public in and for said state, personally appeared Candace Lynn Nelson, Successor Trustee of the Henry T. Holman Trust, 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.

Paul J. Tucker
Notary Public for the State of Utah
Residing at: South Jordan
Commission Expires: October 25, 2018



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.

x Dated this 7th day of May 2018.

Patricia R. Holman Trust U.T.A.D. October 9, 1990

x By: Kate Bekins, Trustee
Kate Bekins, Successor Trustee

Henry T. Holman Trust U.T.A.D. October 9, 1990

By: _____
Candace Lynn Nelson, Successor Trustee

State of _____ } ss
County of _____ }

On this _____ day of May, 2018, before me, _____ a Notary Public in and for said state, personally appeared Kate Bekins, Successor Trustee of the Patricia R. Holman Trust, 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 _____
Residing at: _____
Commission Expires: _____

State of _____ } ss
County of _____ }

On this _____ day of May, 2018, before me, _____ a Notary Public in and for said state, personally appeared Candace Lynn Nelson, Successor Trustee of the Henry T. Holman Trust, 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 _____
Residing at: _____
Commission Expires: _____

BWA
5-7-18
See attached Certificate →

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

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 Contra Costa

On 5-7-18 before me, Bonnie W. Arnold, Notary Public,
Date Here Insert Name and Title of the Officer

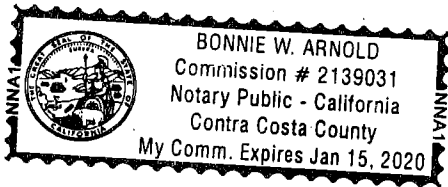
personally appeared Kate Bekins

Name(s) of Signer(s)

who proved 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/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



Signature Bonnie W. Arnold
Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: Statutory Warranty Deed Document Date: 5-7-18

Number of Pages: 2 Signer(s) Other Than Named Above: Candace Lynn Nelson Successor Trustee

Capacity(ies) Claimed by Signer(s)

Signer's Name: Kate Bekins

- ☐ Corporate Officer — Title(s): _____
☐ Partner — ☐ Limited ☐ General
☐ Individual ☐ Attorney in Fact
☒ Trustee ☐ Guardian or Conservator
☐ Other: _____

Signer Is Representing: _____

Signer's Name: _____

- ☐ Corporate Officer — Title(s): _____
☐ Partner — ☐ Limited ☐ General
☐ Individual ☐ Attorney in Fact
☐ Trustee ☐ Guardian or Conservator
☐ Other: _____

Signer Is Representing: _____