NO PART OF ANY STEVENS-NESS FORM MAY BE REPRODUC

Keith and Nadine Ekstrom 26528 Old Rainier Road Rainier, Oregon 97048 Owner's Name and Address Scott Ekstrom 10909 Crystal Spring	
Klamath Falls, Oregon 97603 Beneficiary's Name and Address	
After recording, return to (Name and Address): Keith Ekstrom 26528 Old Rainier Road Rainier, Oregon 97048	
Until requested otherwise, send all tax statements to (Name and Address): Keith And Nadine Ekstrom 26258 Old Rainier Road Rainier, Oregon 97048	
NOTICE TO OWNER: You should carefully read all informat form must be recorded before your death or it will not be e	

01/22/2019 01:41:51 PM

Fee: \$82.00

SPACE RESERVED FOR RECORDER'S USE

Rainier, Oregon 97048	
NOTICE TO OWNER: You should carefully read all information on this form. You may want to consult a law form must be recorded before your death or it will not be effective. (Type or legibly print all information.)	vyer before using this form. This
TRANSFER ON DEATH DEED KNOW ALL BY THESE PRESENTS that I, Keith and Nadine Ekstrom	
whose address is 10909 Crystal Spring Klamath Falls, Oregon 97063	e real property described below.
upon my death, do hereby transfer to the beneficiary designated below, all of my right, interest and ti with the tenements, hereditaments and appurtenances thereunto belonging or in any way appertaining, Klamath County, State of Oregon, described as follows (legal description the E 1/2 W 1/2 SE 1/4 SW 1/4 (E 1/2 W 1/2 of governme Lot 7) of Section 21, Township 39 South, Range 10 East the Willamette Meridian, in the County of Klamath, Statof Oregon.	situated in n of the property): nent t of
I designate Scott Ekstrom Whose mailing address, if available, is 10909 Crystal Spring, Klamath Fall	ls, Oregon 97603
as my primary beneficiary* if that person survives me. (Optional) I designate Joy Ekstrom 27172 S. W. Vanderschuere Road, Hill whose mailing address, if available, is	lsboro, Ore. 97123
as my alternate beneficiary** if that person survives me. Before my death, I have the right to revoke this deed. (Optional) SPECIAL TERMS:	
In construing this instrument, where the context so requires, the singular includes the plural. IN WITNESS WHEREOF, the undersigned has executed this instrument on worken by the context so requires, the singular includes the plural. In WITNESS WHEREOF, the undersigned has executed this instrument on the context so requires, the singular includes the plural.	75, 2018 D
STATE OF OREGON, County of Mahington ss. This instrument was acknowledged before me on Melenber	

*ORS 93.961(2) states that a designated beneficiary must be identified by name; "a beneficiary designation that identifies beneficiaries only as members of a class is void."
**93.953(2)(b) states that an individual may designate one or more "Alternate beneficiaries who take the property only if none of the primary beneficiaries is qualified or survives the transferor."

Notary Public for Oregon

My commission expires ___/MGMA_{g,} 2022

OFFICIAL STAMP

AMY L BRYAN

NOTARY PUBLIC - OREGON COMMISSION NO. 977027 MY COMMISSION EXPIRES AUGUST 06, 2022

NOTE: ORS 93 provides that Transfer on Death deeds: (a) Transfer only property that the transferor owns at time of death, may not transfer property to designated beneficiaries with right of survivorship, but may designate shares of ownership (93.969); (b) Are always revocable (93.955); (c) Must be recorded before death to be effective (93.961(1)(d)), but need not be delivered to designated beneficiaries (93.963(1)); (d) Transfer property without any warranties or covenants of title (93.969(4)), and subject to all debts of the decedent, as well as to all liens, mortgages and conveyances to which the property may be subject (93.969(2)).