

2019-013460

Klamath County, Oregon

BLO

NO PART OF ANY STEVENS-NESS FORM MAY BE REPROD



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11/18/2019 03:13:24 PM

Fee: \$97.00

SPACE RESERVED
FOR
RECORDER'S USE

John M. SPRINGER JR

24620 State Hwy 49

Auburn CA 95602

Grantor's Name and Address

ALEXIS GARDUND

1206 Silver Ridge Way

Sac, CA 95831

Grantee's Name and Address

After recording, return to (Name and Address):

ALEXIS GARDUND

1206 Silver Ridge way

Sacramento CA 95831

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

ALEXIS GARDUND

1206 Silver Ridge Way

Sacramento CA 95831

WARRANTY DEED

KNOW ALL BY THESE PRESENTS that John M. SPRINGER JR.hereinafter called grantor, for the consideration hereinafter stated, to grantor paid by ALEXIS GARDUNDhereinafter called grantee, does hereby grant, bargain, sell and convey unto the grantee and grantee's heirs, successors and assigns, that certain real property, with the tenements, hereditaments and appurtenances thereunto belonging or in any way appertaining, situated in KLAMATH County, State of Oregon, described as follows (legal description of property):

The NE 1/4, NE 1/4, SW 1/4 of Section 31, Township 35 South, RANGE 13 EAST of
The Willamette Meridian KLAMATH County, OREGON. Further Described as

R 3513-03100-01200

10 Acres ±

Subject To : Covenants, conditions, Reservations, Easements, Restrictions, Rights,
Right of Ways, And All Matters of Record.

(IF SPACE INSUFFICIENT, CONTINUE DESCRIPTION ON REVERSE)

To Have and to Hold the same unto grantee and grantee's heirs, successors and assigns forever.

And grantor hereby covenants to and with grantee and grantee's heirs, successors and assigns, that grantor is lawfully seized in fee simple of the above granted premises, free from all encumbrances except (if no exceptions, so state): N/A

and that
grantor will warrant and forever defend the premises and every part and parcel thereof against the lawful claims and demands of all persons whomsoever, except those claiming under the above described encumbrances.

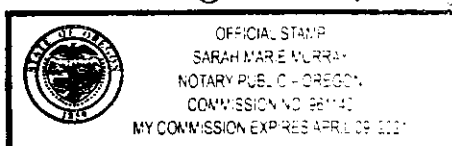
The true and actual consideration paid for this transfer, stated in terms of dollars, is \$ 15,000. ^① However, the actual consideration consists of or includes other property or value given or promised which is ☐ the whole ☐ part of the (indicate which) consideration. ^② (The sentence between the symbols ^①, if not applicable, should be deleted. See ORS 93.030.)

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.

IN WITNESS WHEREOF, grantor has executed this instrument on October 8, 2019; any signature on behalf of a business or other entity is made with the authority of that entity.

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.

John M. Springer JR by
Lynette Pierce as attorney
in fact
Alexis

STATE OF OREGON, County of Josephine ss.This instrument was acknowledged before me on October 8 2019
by Alexis Diane Shizuo GardundThis instrument was acknowledged before me on October 8 2019by Lynette May Pierceas Power of Attorneyof John M. Springer Jr.

Notary Public - Oregon

My commission expires April 09 2021

Durable Unlimited Power of Attorney

Effective Immediately

Notice to Adult Signing this Document: This is an important document. Before signing this document, you should know these important facts. By signing this document, you are not giving up any powers or rights to control your finances and property yourself. In addition to your own powers and rights, you are giving another person, your attorney-in-fact, broad powers to handle your finances and property, which may include powers to encumber, sell or otherwise dispose of any real or personal property without advance notice to you or approval by you. **THE POWERS GRANTED UNDER THIS DOCUMENT ARE EFFECTIVE IMMEDIATELY AND WILL REMAIN IN EFFECT IF YOU BECOME DISABLED OR INCAPACITATED.** This document does not authorize anyone to make medical or other health care decisions for you. If you own complex or special assets such as a business, or if there is anything about this form that you do not understand, you should ask a lawyer to explain this form to you before you sign it. If you wish to change your durable unlimited power of attorney, you must complete a new document and revoke this one. You have the right to revoke the designation of the attorney-in-fact and the right to revoke this entire document at any time and in any manner. You may revoke this document at any time by destroying it, by directing another person to destroy it in your presence or by signing a written and dated statement expressing your intent to revoke this document. If you revoke this document, you should notify your attorney-in-fact and any other person to whom you have given a copy of the form. You also should notify all parties having custody of your assets. These parties have no responsibility to you unless you actually notify them of the revocation. If your attorney-in-fact is your spouse and your marriage is annulled, or you are divorced after signing this document, this document may become invalid. Since some third parties or some transactions may not permit use of this document, it is advisable to check in advance, if possible, for any special requirements that may be imposed. You should sign this form only if the attorney-in-fact you name is reliable, trustworthy and competent to manage your affairs. Generally, you may designate any competent adult as the attorney-in-fact under this document.

I, John M. Springer Jr., of 28344 Hunter Creek Hts.,
City of Gold Beach, State of Oregon, as Principal,
do appoint Lynette M. Pierce, of 24620 State Hwy. 49,
City of Auburn, State of California, as my
attorney-in-fact to act in my name, place and stead in any way which I myself could do, if I were personally present,
with respect to all the following matters to the extent that I am permitted by law to act through an agent:

I grant my attorney-in-fact the maximum power under law to perform any act on my behalf that I could do personally, including but not limited to, all acts relating to any and all of my financial transactions and/or business affairs including all banking and financial institution transactions, all real estate or personal property transactions, all insurance or annuity transactions, all claims and litigation, and any and all business transactions.

This power of attorney shall become effective immediately and shall remain in full effect upon my disability or incapacitation. This power of attorney grants no power or authority regarding healthcare decisions to my designated attorney-in-fact.

If the attorney-in-fact named above is unable or unwilling to serve, then I appoint

Ted Pierce, of 24620 State Hwy. 49,
City of Orbun, State of California, to be my
successor attorney-in-fact for all purposes hereunder.

My attorney-in-fact is granted full and unlimited power to act on my behalf in the same manner as if I were personally present. My attorney-in-fact accepts this appointment and agrees to act in my best interest as he or she considers advisable. To induce any third party to rely upon this power of attorney, I agree that any third party receiving a signed copy or facsimile of this power of attorney may rely upon such copy, and that revocation or termination of this power of attorney shall be ineffective as to such third party until actual notice or knowledge of such revocation or termination shall have been received by such third party. I, for myself and for my heirs, executors, legal representatives and assigns, agree to indemnify and hold harmless any such third party from any and all claims that may arise against such third party by reason of such third party having relied on the provisions of this power of attorney. This power of attorney may be revoked by me at any time and is automatically revoked upon my death. My attorney-in-fact shall not be compensated for his or her services nor shall my attorney-in-fact be liable to me, my estate, heirs, successors, or assigns for acting or refraining from acting under this document, except for willful misconduct or gross negligence. Revocation of this document is not effective unless a third party has actual knowledge of such revocation.

I intend for my attorney-in-fact under this Power of Attorney to be treated as I would be with respect to my rights regarding the use and disclosure of my individually identifiable health information or other medical records. This release authority applies to any information governed by the Health Insurance Portability and Accountability Act of 1996 (aka HIPAA), 42 USC 1320d and 45 CFR 160-164.

Signature and Declaration of Principal

I, John M. Springer Jr, the principal, sign my name to this power of attorney this 26 day of May 2017 and, being first duly sworn, do declare to the undersigned authority that I sign and execute this instrument as my power of attorney and that I sign it willingly, or willingly direct another to sign for me, that I execute it as my free and voluntary act for the purposes expressed in the power of attorney and that I am eighteen years of age or older, of sound mind and under no constraint or undue influence, and that I have read and understand the contents of the notice at the beginning of this document.

John M. Springer Jr
Signature of Principal

Witness Attestation

I, Luana Bolinger, the first witness, and I, Stephanie Mayotte, the second witness, sign my name to the foregoing power of attorney being first duly sworn and do declare to the undersigned authority that the principal signs and executes this instrument as his/her power of attorney and that he/she signs it willingly, or willingly directs another to sign for him/her, and that I, in the presence and hearing of the principal, sign this power of attorney as witness to the principal's signing and that to the best of my knowledge the principal is eighteen years of age or older, of sound mind and under no constraint or undue influence.

Luana Bolinger
Signature of First Witness

Stephanie Mayotte
Signature of Second Witness

Notary Acknowledgment

State of Oregon County of Josephine
Subscribed, sworn to and acknowledged before me by John M. Springer Jr., the Principal,
and subscribed and sworn to before me by Luana Balingier, witness, this 26th
day of May 2017.

Cathy Dahl
Notary Signature

Notary Public,

In and for the County of Josephine
State of Oregon

My commission expires: 07-20-19



Seal

Acknowledgment and Acceptance of Appointment as Attorney-in-Fact

I, Lynette M. Pierce have read the attached power of attorney and am the person identified as the attorney-in-fact for the principal. I hereby acknowledge that I accept my appointment as Attorney-in-Fact and that when I act as agent I shall exercise the powers for the benefit of the principal; I shall keep the assets of the principal separate from my assets; I shall exercise reasonable caution and prudence; and I shall keep a full and accurate record of all actions, receipts and disbursements on behalf of the principal.

Lynette M. Pierce
Signature of Attorney-in-Fact

5-26-17
Date

Acknowledgment and Acceptance of Appointment as Successor Attorney-in-Fact

I, Ted Pierce have read the attached power of attorney and am the person identified as the successor attorney-in-fact for the principal. I hereby acknowledge that I accept my appointment as Successor Attorney-in-Fact and that, in the absence of a specific provision to the contrary in the power of attorney, when I act as agent I shall exercise the powers for the benefit of the principal; I shall keep the assets of the principal separate from my assets; I shall exercise reasonable caution and prudence; and I shall keep a full and accurate record of all actions, receipts and disbursements on behalf of the principal.

Signature of Successor Attorney-in-Fact

Date