## RECORDING REQUESTED BY AND WHEN REDORDED MAIL TO

### MAIL TAX STATEMENTS TO:

Diana Marie Lulay, Trustee 3939 South 6<sup>th</sup> Street #225 Klamath Falls, Oregon 97603

# 2020-000829 Klamath County, Oregon

00253331202000008290020020

01/22/2020 08:32:31 AM

Fee: \$87.00

## SPACE ABOVE THIS LINE FOR RECORDER'S USE

# **Grant Deed**

THE UNDERSIGNED GRANTOR (s) DECLARE (s)

Diana Marie, Lulay

hereby GRANTS (s) to:

Diana Marie, Lulay, as Trustee of the Lulay Family Revocable Trust of January 28, 2010,

the following described real property in the County of Klamath, State of Oregon:

Lot 63, Block 32, Tract 1184, Oregon Shores Unit 2, First Addition, according to the official plat thereof on file in the office of the County Clerk, Klamath County, Oregon.

Subject to:

1. Covenants, conditions, restrictions and/or easements, if any, affecting title, which may appear in the public record, including those shown on any recorded plat or survey.

|   | ,                                      |
|---|--|
| Dated December 30, 2019 Diana Marie                                       | a Marie, Lulay                         |
| Onbefore me   |  |
| Notary Public, personally appeared Diana Maris Lulay, who proved to me on |  |
| basis of satisfactory evidence to be the person whose name is             |  |
| subscribed to the within instrument and acknowledges to me                |  |
| that she executed the same in her authorized capacity, and the            | ,                                      |
| by her signature on the instrument the person, or entity upon             | -1                                     |
| behalf of which the person 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   | (This area for official notarial seal) |

#### 

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 \_ Here Insert Name and Title of the Officer personally appeared 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

WENDY E. CULBRETH iotary Public - California Tulare County Commission # 2274011 My Comm. Expires Jan 29, 2023 laws of the State of California that the foregoing paragraph is true and correct.

WITNESS (ny hand and official seal.

Signatu

Place Notary Seal and/or Stamp Above

Signature of Notary Public

| OPTI  | ONAL                                |  |
|---|-------------------------------------|--|
| 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:  | ED                                  |  |
| Document Date: 12-30-2019   | Number of Pages:                    |  |
| Signer(s) Other Than Named Above:   |                                     |  |
| Capacity(ies) Claimed by Signer(s)  |                                     |  |
| Signer's Name:  | Signer's Name:                      |  |
| □ Corporate Officer – Title(s):   | □ Corporate Officer – Title(s):     |  |
| ☐ Partner - ☐ Limited ☐ General   | ☐ Partner — ☐ Limited ☐ General     |  |
| ☐ Individual ☐ Attorney in Fact   | ☐ Individual ☐ Attorney in Fact     |  |
| ☐ Trustee ☐ Guardian of Conservator   | ☐ Trustee ☐ Guardian of Conservator |  |
| □ Other:  | □ Other:                            |  |
| Signer is Representing:   | Signer is Representing: 5t 4        |  |