

THIS SPACE RESERVED FO

2020-005600

Klamath County, Oregon 05/05/2020 09:37:28 AM

Fee: \$92.00

After recording return to:
Scott P. Harrell and Kristal D. Harrell
2052 NW Eucalyptus Dr.
Hermiston, OR 97838
Until a change is requested all tax statements shall be
sent to the following address:
Scott P. Harrell and Kristal D. Harrell
2052 NW Eucalyptus Dr.
Hermiston, OR 97838
File No. 349697AM

STATUTORY WARRANTY DEED

Renato Y. Bullicer and Conchita C. Bullicer, as Tenants by the Entirety,

Grantor(s), hereby convey and warrant to

Scott P. Harrell and Kristal D. Harrell, 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 2 in Block 7 of TRACT 1083, CEDAR TRAILS, according to the official plat thereof on file in the office of the County Clerk of Klamath County, Oregon.

The true and actual consideration for this conveyance is \$21,000.00.

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.

ated this 1st day of May , 2020
Remato y pullion
nato Y. Bullicer
Conclita C. Billian
oute of} ss ounty of}
ounty of)
a Notary Public in and for said state, resonally appeared Renato Y. Bullicer and Conchita C. Bullicer, known or identified to me to be the person(s) whose name(s) are subscribed to the within Instrument and acknowledged to me that he/she/they executed same. WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal the day and year in this certificate first ove written.
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otary Public for the State of
esiding at:
ommission Expires:

* see CA acknowledgment

Corporate Officer - Title(s):

X Individual

Signer is Representing:

.] Trustee

Other:

Partner - Limited General

Attorney in Fact

☐ Guardian or Conservator

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 before me personally appeared 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(les), 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. PERLA ESQUEDA WITNESS my hand and official seal. tary Public - California Ventura County Commission # 2315737 Comm. Expires Jan 11, 2024 Signature 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: _ Number of Pages: _ Document Date: Ma Signer(s) Other Than Named Above: Capacity(ies) Claimed by Signer(s) Signer's Name: Renato Signer's Name:

☐ Corporate Officer — Title(s):

Signer Is Representing:

M Individual

☐ Trustee

Other:

☐ Partner — ☐ Limited ☐ General

☐ Attorney in Fact

☐ Guardian or Conservator