THIS INSTRUMENT WILL NOT ALLOW USE OF THE PROPERTY DESCRIBED IN THIS INSTRUMENT IN VIOLATION OF APPLICABLE LAND USE LAWS AND REGULATION. BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT. THE PERSON ACQUIRING THE TITLE TO THE PROPERTY SHOULD CHECK WITH THE APPROPRIATE CITY OR COUNTY PLANNING DEPARTMENT TO VERIFY APPROVED USES.

ASSESSOR PARCEL NO. R359016

NOTE: Deed prepared by Grantor below. NAME: Michael Kincade, Tr

ADDRESS: 4720 Loch Lomond Dr CITY/ST/ZIP: Carmichael, CA 95608

WHEN RECORDED MAIL TO (GRANTEE): MAIL TAX STATEMENTS TO (GRANTEE): NAME: P Peters, J. Gavin & Jasmin Gavin

ADDRESS: 7 Beauford Lane CITY/ST/ZIP: Boston, MA 02125 2020-009468

Klamath County, Oregon



08/03/2020 11:52:45 AM

Fee: \$87.00

## SPECIAL WARRANTY DEED

FOR VALUABLE CONSIDERATION, receipt of which is acknowledged, the Grantor (Seller) whose name(s) is/are.

Michael Kincade Trustee of the Michael Kincade Revocable Trust of 2014

Does conveys and specially warrants to:

Paris Peters, Justin J.K. Gavin, Jasmin Gavin

Grantee, the following described real property free of encumberances created by the Grantor, situated in:

Klamath County, Oregon

radinal county, or	ogon e
The N 1/2 S 1/2 NE 1/4 NW 1/4 of Sec 7, TWP	36 South, RNG 13 East,. W.M.
MAPTAXLOT: 3613-00700-00500-000	T/ 7/
Witness Whereof, my hand has been set on	JU(4/10,2020
COSTR.	
Signature in three above	Signature on line above
Print on line above	Print on line above
State of Catifornia, County of Subscribed and sworn to (or affirmed) before me on this day of by  proved to me on the basis of salls actory evidence to be the person(s) who appeared before me.  Signature (seal)	THERE SEE SHOWER

## **CALIFORNIA ALL- PURPOSE** CERTIFICATE OF ACKNOWLEDGMENT

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.

Man: G. 2016

State of COUTCY PUR	}
County of Sawamento	}
On July 26, 2020 before me,	Marks, Notary Public  (Here insert game and tifle of the officer)
personally appeared Multiple	Christian A hatta paragray whose
	factory evidence to be the person(s) whose instrument and acknowledged to me that
	entheir authorized capacity(ies), and that by
	ent the person(s), or the entity upon behalf of
which the person(s) acted, executed the	e instrument.
	Lunder the Journ of the State of Colifornia that
the foregoing paragraph is true and co	under the laws of the State of California that
the teregoing paragraph to that area	C. MARKS }
WITNESS my hand and official seal.	NOTARY PUBLIC CALIFORNIA C
	Comm. Expires FEB 8, 2022
	Adama Dublic Cool)
Notary Public Signature / (N	otary Public Seal)
ADDITIONAL OPTIONAL INFORMAT	INSTRUCTIONS FOR COMPLETING THIS FORM  ON This form complies with current California statutes regarding notary wording and,
DESCRIPTION OF THE ATTACHED DOCUMENT	if needed, should be completed and attached to the document. Acknowledgments from other states may be completed for documents being sent to that state so long
Special Warranty Dea	as the wording does not require the California notary to violate California notary law.
(Title or description of attached document)	<ul> <li>State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment.</li> </ul>
(Title or description of attached document continued)	<ul> <li>Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed.</li> </ul>
Number of Pages Document Date	<ul> <li>The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public).</li> </ul>
	<ul> <li>Print the name(s) of document signer(s) who personally appear at the time of notarization.</li> </ul>
CAPACITY CLAIMED BY THE SIGNER	Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/she/they, is /are) or circling the correct forms. Failure to correctly indicate this
☐ Individual (s)☐ Corporate Officer	information may lead to rejection of document recording.  The notary seal impression must be clear and photographically reproducible.
(Title)	Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form.
☐ Partner(s)	<ul> <li>Signature of the notary public must match the signature on file with the office of the county clerk.</li> </ul>
☐ Attorney-in-Fact ☐ Trustee(s)	<ul> <li>Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document.</li> </ul>
☐ Trustee(s)	<ul> <li>Indicate title or type of attached document, number of pages and date.</li> </ul>

Indicate the capacity claimed by the signer. If the claimed capacity is a

corporate officer, indicate the title (i.e. CEO, CFO, Secretary).

· Securely attach this document to the signed document with a staple.

www.NotaryClasses.com 800-873-9865

Other