



2020-009687

Klamath County, Oregon

08/05/2020 02:51:18 PM

Fee: \$92.00

THIS SPACE RESERVED FOR RECORDER'S USE

After recording return to:

Gerard O'Brien and Vikki O'Brien

2946 N Spinaker Isle

Klamath Falls, OR 97601

Until a change is requested all tax statements shall be sent to the following address:

Gerard O'Brien and Vikki O'Brien

2946 N Spinaker Isle

Klamath Falls, OR 97601

File No. 377829AM

STATUTORY WARRANTY DEED

Leslie Christman as Trustee of the Survivors Trust, under the Tucker Trust dated January 19, 1998,

Grantor(s), hereby convey and warrant to

Gerard O'Brien and Vikki O'Brien, 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 63 in Block 1 of FIRST ADDITION TO HARBOR ISLES, TRACT 1252, according to the official plat thereof on file in the office of the County Clerk, Klamath County, Oregon.

"CURRENT YEAR'S TAXES, A LIEN IN AN AMOUNT TO BE DETERMINED BUT NOT YET DUE AND PAYABLE

The true and actual consideration for this conveyance is \$280,000.00.

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:

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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.

Dated this 1st day of August, 2020

Leslie Christman, Trustee of the Survivors Trust, under the Tucker Trust dated January 19, 1998

By: Leslie Christman
Leslie Christman, Trustee

State of California} ss.
County of _____ }

On this ____ day of _____, 2020, before me, _____ a Notary Public in and for said state, personally appeared Leslie Christman known or identified to me to be the person whose name is subscribed to the foregoing instrument as trustee of the Survivor's Trust under the Tucker Trust dated Jan. 19, 1998, and acknowledged to me that he/she/they executed the same as Trustee.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal the day and year in this certificate first above written.

Notary Public for the State of _____
Residing at: Klamath
Commission Expires:

SEE UNFASTENED
CALIFORNIA COMPLIANT
CERTIFICATE

Samuel Lane

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.

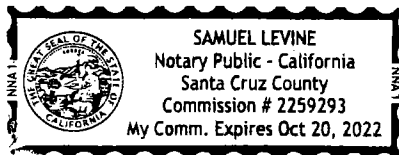
State of California

County of Santa Cruz

On August 1, 2020 before me Samuel Levine, a Notary Public
personally appeared LESLIE CHRISTMAN

who proved to me on the basis of satisfactory evidence to be the person whose name 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 laws of the State of California that the
foregoing paragraph is true and correct. WITNESS my hand and official seal.



Signature

Samuel Levine

Samuel Levine, a Notary Public
831.325.1710

OPTIONAL INFORMATION BELOW

DESCRIPTION OF ATTACHED DOCUMENT

- ☐ Signing as **Individuals**
☐ Signing as **Trustees**

Title or Type of Document STATUTORY WARRANTY DEED

☐ Number of Pages TWO or ☐ Specific Page Number : _____

This optional Fraud Deterrent is NOT a state requirement.

Holographic ID indicator numbers on signed document _____ and here _____

Signier(s) Other than Named Above : _____

Name of the Notary: Samuel Levine

County of notary's principal place of business: Santa Cruz County

Phone Number : (831) 325-1710

Notary's registration number: 2259293

Commission Expiration date: October 20, 2022