2020-015357

Klamath County, Oregon

11/24/2020 09:39:01 AM

Fee: \$127.00

WHEN RECORDED RETURN TO:
MAIL TAX STATEMENT TO:
Harbor Trust INC
3824 Cedar Springs Rd #801-1362 Dallas,
TX 75219

WARRANTY DEED

THE GRANTOR(S):

Roy H. Russell & Patricia W. Russell & Kerwin S. Russell & Darrin B. Russell, as Tenants by its entirety, with a mailing address of 413 S Farber Ave., Covina, CA 91724,

for and in consideration of: Six Thousand Two Hundred Fifty Dollars and 46/100 (6,250.46) and other good and valuable consideration grants, bargains, sells, conveys and warranties to

THE GRANTEE(S):

Harbor Trust, Inc. with a mailing address of 468 Old Harbor Road, Westport, MA 02790,

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

Lot 41, Block 10, KLAMATH FALLS FOREST ESTATES Highway 66 Unit Plat No. 1, as recorded in Klamath County, Oregon

Parcel ID: R385425

Subject to existing taxes, assessments, liens, encumbrances, covenants, conditions, restrictions, rights of way and easements of record the grantor hereby covenants with the Grantee(s) that Grantor is lawfully seized in fee simple of the above granted premises and has good right to sell and convey the same; and that Grantor, his heirs, executors and administrators shall warrant and defend the title unto the Grantee, his heirs and assigns against all lawful claims whatsoever.

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. 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 AGAINSTFARMING 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.

(Grantor Signature Pages to Follow)

GRANTOR SIGNATURE(S): May Humle 413 S Farber Ave. Covina, CA 91724 STATE OF _____ COUNTY OF _____ SS: This instrument was acknowledged before me on this _____ day of by Roy H. Russell. SEE ATTACHED NOTARIZED **Notary Public** DOCUMENT DATED: 11 13/2020 Signature of person taking acknowledgment

Title and Rank

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 Calloinia	}		
County of JOS Ancolus	1		
On			
I certify under PENALTY OF PERJUF the foregoing paragraph is true and co	RY under the laws of the State of California that orrect.		
WITNESS my hand and official seal.	CHRISTINE R. STAFFORD COMM. # 2213584 Notary Public - California SAN BERNARDINO COUNTY My Comm. Expires SEPT. 18, 2021		
Notary Public Signature (F	Notary Public Seal)		
DESCRIPTION OF THE ATTACHED DOCUMENT Warrant Dec (Title or description of attached document) (Title or description of attached document continued) Number of Pages Document Date	INSTRUCTIONS FOR COMPLETING THIS FORM This form complies with current California statutes regarding notary wording and, 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 as the wording does not require the California notary to violate California notary law. State and County information must be the State and County where the document signerts) personally appeared before the notary public for acknowledgment. Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed. 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). Print the namets) of document signer(s) who personally appear at the time of notarization.		
CAPACITY CLAIMED BY THE SIGNER Individual (s) Corporate Officer (Title) Partner(s) Attorney-in-Fact Trustee(s) Other	 ☑ 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 information may lead to rejection of document recording. ☑ The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form. ☑ Signature of the notary public must match the signature on file with the office of the county clerk. ☑ Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document. ☑ Indicate title or type of attached document, number of pages and date. ☑ Indicate the capacity claimed by the signer is the total search. 		
	corporate officer, indicate the title (i.e. CEO, CFO, Secretary). Securely attach this document to the signed document with a staple		

GRANTOR SIGNATURE(S): Patricia W. Russell 413 S Farber Ave. Covina, CA 91724 STATE OF _____ COUNTY OF _____ SS: This instrument was acknowledged before me on this _____ day of by Patricia W. Russell. **Notary Public** Signature of person taking acknowledgment SEE ATTACHED NOTARIZED DOCUMENT DATED: 11 | 3 | 70 20 Title and Rank

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 105 Angeles	}
On 11 13 2020 before me	Christine R. Stafford notary public
who proved to me on the basis of sati name(s) is/are subscribed to the within he/she/they executed the same in his	isfactory evidence to be the persop(e) whose in instrument and acknowledged to me that when the person(s) and that by ment the person(s) are the person(s).
I certify under PENALTY OF PERJUF the foregoing paragraph is true and co	RY under the laws of the State of California that prrect.
WITNESS my hand and official seal.	CHRISTINE R. STAFFORD COMM. # 2213584 Notary Public - California
Clark Its	SAN BERNARDINO COUNTY My Comm. Expires SEPT. 18, 2021
Notary Public Signature (I	Notary Public Seal)
DESCRIPTIONAL OPTIONAL INFORMAT DESCRIPTION OF THE ATTACHED DOCUMENT War Deconomic Title or description of 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 as the wording does not require the California notary to violate California notary law.
(Title or description of attached document continued:	 State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment. Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment.
Number of Pages Document Date	The notary public must print his or her name as it appears within his or her commission followed by a commission followed
CAPACITY CLAIMED BY THE SIGNER Individual (s) Corporate Officer (Title) Partner(s) Attorney-in-Fact Trustee(s) Other	Print the name(s) of document signer(s) who personally appear at the time of notarization. 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 information may lead to rejection of document recording. The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form. Signature of the notary public must match the signature on file with the office of the county clerk. Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document. Indicate title or type of attached document, number of pages and date indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary).

GRANTOR SIGNATURE(S): DATED: 11-16-20 Kerwin S. Russell 413 S Farber Ave. Covina, CA 91724 STATE OF _____ COUNTY OF _____ ss: This instrument was acknowledged before me on this _____ day of by Kerwin S. Russell. Notary Public Signature of person taking acknowledgment SEE ATTACHED NOTARIZED DOCUMENT DATED: 11/14/2020

Title and Rank

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.

On ITTU 2020 before me, BNANA FIGURIOA, NOTATY PUBLIC personally appeared YERWIN SHART PUSSON who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/afre subscribed to the within instrument and acknowledged to me that he/spertyteir signature(s) on the instrument in his/per/tyleir authorized capacity(ies), and that by his/per/tyleir 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 head and official seal. Notary Public Signature (Notary Public Sea) INSTRUCTIONS FOR COMPLETING THIS FORM If needed, should be completed and datached in the state so long and datached in the state so long the state of neatraching notary wording and freeded, should be completed and datached in the state so long of soon are required and datached in the state so long of soon are required to a complete with completed and catached in the state so long to wording entities of neatraching of soon are required and catached in the state so long to wording entities (signed) personally appeared which must also be the state that the signer(s) personally appeared which must also be the same that the state of notarization must be the state of notarization must be clear and appears within his or her commission followed by a common by concern the foreity previously appeared which must also be the same that the signate of personally appeared which must also be and the majerity personally appeared which must also be and the other pour title (notary public). Print the name(s) of document segment, where the document document because the correct singular, reseal if a sufficient area semilar provision of document according. The notary salid person are public must be clear and honographically reproducible impression must be clear and honographically reproducible impression must be clear and engages, res	State of California	}
personally appeared PENMIN STEMATE PUSCII 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/spe/tyley executed the same in his/per/tyleir authorized capacity(ies), and that by his/he/tyleir 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. OCAMA. #228532 Notary Public Signature (Notary Public Seal) INSTRUCTIONS FOR COMPLETING THIS FORM This form complies with current California statutes regarding notary wording and if needed, should be completed and attacked to the document. Acknowledgment: from other states may be completed for document. Acknowledgment: from other states may be completed for document being sent to that state so long as the wording does not require the California motary to violate California notary information must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed. 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). Print the name(s) of document signer(s) who personally appeared which must also be the same date the acknowledgment is completed. 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). Indicate the correct singular or plutario to correctly indicate this information may lead to rejection of document recording. The notary seal impression must be clear and photographically reproducible information may lead to rejection of document recording. The notary seal impression must not over text of the seal impression smudges, re-seal if a sufficient again pricessor.	county of 105 angeles	}
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/syle/ty/eir 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. ONAMPTIONAL OPTIONAL INFORMATION DESCRIPTION OF THE ATTACHED DOCUMENT OTHER OF ACTION OF THE ATTACHED DOCUMENT (Title or description of attached document continued) Number of Pages Document Date CAPACITY CLAIMED BY THE SIGNER Individual (s) Corporate Officer (Title)	On 11/10/2020 before me	. Briana figueroa, notary public
WITNESS my hand and official seal. Notary Public Signature	personally appeared FOWN who proved to me on the basis of satiname(s) is/are subscribed to the within he/she/th/ey executed the same in his/her/th/eir signature(s) on the instru	(Here insert name and title of the officer) STEWART PUSSEII sfactory evidence to be the person(s) whose n instrument and acknowledged to me that (ber/their authorized capacity(ies), and that by
Notary Public Signature (Notary Public Seal) INSTRUCTIONS FOR COMPLETING THIS FORM This form complies with current California statutes regarding notary wording and 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 as the wording does not require the California notary to violate California notary (Title or description of attached document) Take or description of attached document continued) Number of Pages Document Date CAPACITY CLAIMED BY THE SIGNER Individual (s) Corporate Officer (Title) COMM. Pages SAME 24 2023 INSTRUCTIONS FOR COMPLETING THIS FORM This form complies with current California statutes regarding notary wording and if needed, should be completed for documents being sent to that state so long as the wording does not require the California notary to violate California notary if needed, should be completed for documents being sent to that state so long as the wording does not require the California notary to violate California notary if the continuency public for acknowledgment is completed 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). Print the name(s) of document signer(s) who personally appear at the time of notarization. Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/she/they, is fare) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording The notary seal impression must be clear and photographically reproducible Impression must not cover text or lines (f seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different states.	I certify under PENALTY OF PERJUR the foregoing paragraph is true and co	RY under the laws of the State of California that prrect.
DESCRIPTION OF THE ATTACHED DOCUMENT OTO PTOT SIGNOR (Title or description of attached document) (Title or description of attached document continued) Number of Pages Document Date Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed. 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). Print the name(s) of document signer(s) who personally appear at the time of notarization. Individual (s) Corporate Officer (Title)	Notany P. Kin Sin.	COMM. #2282532 Notary Public - California LOS ANGELES COUNTY My Comm. Expires MAR 24, 2023
Signature of the notary public must match the signature on file with the office of the county clerk. ☐ Trustee(s) ☐ Other ☐	CAPACITY CLAIMED BY THE SIGNER Corporate Officer Citle) Partner(s) Attorney-in-Fact Trustee(s) Other O	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 as the wording does not require the California notary to violate California notary law State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed 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). Print the name(s) of document signer(s) who personally appear at the time of notarization. Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/she/khey; is /are) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording The notary seal impression must be clear and photographically reproducible Impression must not cover text or lines if seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form Signature of the notary public must match the signature on file with the office of the county clerk. Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document. Indicate title or type of attached document, number of pages and date Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title it is 100 CFO of the claimed capacity is a corporate officer.

GRANTOR SIGNATURE(S): Danis 2 Minul Darrin B. Russell 413 S Farber Ave. Covina, CA 91724 STATE OF _____ COUNTY OF _____ SS: This instrument was acknowledged before me on this _____ day of ______ by Darrin B. Russell. SEE ATTACHED NOTARIZED DOCUMENT DATED: 11 | 13 | 2020 **Notary Public** Signature of person taking acknowledgment Title and Rank

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 105 angeles	}
On 11/13/2020 before me.	Briana figueroa, notary public
personally appeared (////////////////////////////////////	1/1/1 KINCFII
he/she/they executed the same in his	sfactory evidence to be the person(s) whose in instrument and acknowledged to me that //her/their authorized capacity(ies), and that by ment the person(s), or the entity upon behalf of he instrument.
I certify under PENALTY OF PERJUR	Y under the laws of the State of California that
the foregoing paragraph is true and co	prrect.
WITNESS my Wand and official seal.	BRIANA FIGUEROA COMM. #2282532 Notary Pubble - Salinoma LOS ANGEL ES COUNTY
Notary Public Stanature (A	Notary Public Seal)
ADDITIONAL OPTIONAL INFORMAT	INSTRUCTIONS FOR COMPLETING THIS FORM
DESCRIPTION OF THE ATTACHED DOCUMENT GIANTOI SIGNATURES	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 as the wording does not require the California notary to yield to California notary.
(Title or description of attached document)	State and County information must be the State and County information mus
(Title or description of attached document continued)	Date of notarization must be the date that the support paragraph.
Number of Pages Document Date	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 (or the public must be a comma and then your title (or the public must be a comma and then your title (or the public must be a comma and then your title (or the public must be a comma and then your title (or the public must be a comma and then your title (or the public must be a comma and then your title (or the public must be a comma and then your title (or the public must be a comma and then your title (or the public must be a comma and then your title (or the public must be a comma and then your title (or the public must be a comma and the public must be a complex to the public must be a comma and the public must be a complex to the public must be a comma and the public must be a command to the c
CAPACITY CLAIMED BY THE SIGNER	notarization.
│ □ Individual (s)	 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 information may lead to rejection of decimal to the correct forms.
☐ Corporate Officer	The notary seal impression must be clear and photographically.
(Title) □ Partner(s)	sufficient area permits, otherwise complete a different colorant of a
☐ Attorney-in-Fact	the county clerk
☐ Trustee(s)	Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document
Other	Indicate the or type of attached document, number of pages and date
015 Version www.NotaryClasses.com.800.877.caas	corporate officer, indicate the title (i.e. CEO, CFO, Secretary)

Securely attach this document to the signed document with a staple