



2021-002890

Klamath County, Oregon

02/26/2021 12:24:01 PM

Fee: \$92.00

THIS SPACE RESERVED FOR

After recording return to:

Randall E. Von Tungeln

2313 E 9th St

Vancouver, WA 98661

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

Randall E. Von Tungeln

2313 E 9th St

Vancouver, WA 98661

File No. 442434AM

STATUTORY WARRANTY DEED

Michael Kincade,
Trustee of the Michael Kincade Revocable Trust of 2014,

Grantor(s), hereby convey and warrant to

Randall E. Von Tungeln,

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:

The N1/2 NE1/4 NE1/4 and the N1/2 S1/2 NE1/4 NE1/4 of Section 36, Township 34 South, Range 7 1/2 East of the Willamette Meridian, Klamath County, Oregon.

The true and actual consideration for this conveyance is \$48,500.00.

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.

Dated this 25 day of FEB, 2021

The Michael Kincade Revocable Trust

By: [Signature] TRUSTEE
Michael Kincade, Trustee

State of CA } ss.
County of Sacramento }

On this 25 day of February, 2021, before me, LAKERS a Notary Public in and for said state, personally appeared Michael Kincade known or identified to me to be the person whose name is subscribed to the foregoing instrument as trustee of the Michael Kincade Revocable Trust of 2014, 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: _____
Commission Expires: _____

See Attached

ACKNOWLEDGEMENT

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) SS
COUNTY OF Sacramento)

On 2/25/21, before me, **L. Akers, Notary Public** personally appeared

Michael Kincade

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 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.

SEAL

WITNESS my hand and official seal.

Signature [Signature]
L. AKERS
NOTARY PUBLIC



In and for the State of California
County of Sacramento
My Commission Expires **07/19/2021**
Commission Number **2202106**

OPTIONAL SECTION

CAPACITY CLAIMED BY SIGNER

- ☐ INDIVIDUAL
☐ PARTNER (S) - ☐ LIMITED ☐ GENERAL
☐ ATTORNEY-IN-FACT
☒ TRUSTEES of the Michael Kincade Revocable Trust of 2014
☐ OTHER

Title or Type of Document Statutory Warranty Deed

Number of Pages _____ Date of Document _____

Signer(s) Other Than Named Above _____