

Returned at Counter

2021-003172

Klamath County, Oregon



00275127202100031720040046

03/03/2021 11:30:49 AM

Fee: \$97.00

Prepared By

Name: Nicholas Moxley

Address: ~~13100 Egert rd~~ 5303 Bliss rd

City: Bonanza

State: Oregon Zip Code: 97625

97623

After Recording Return To Tax Statements

Name: Nicholas Moxley

Address: ~~13100 Egert rd~~ 5303 Bliss rd

City: Bonanza

State: Oregon Zip Code: 97625

97623

Space Above This Line for Recorder's Use

OREGON QUIT CLAIM DEED

STATE OF OREGON

COUNTY OF Klamath

KNOW ALL MEN BY THESE PRESENTS, That Trustees of The Ferrarese Family Trust, a
Trustee residing at 1161 East F Street, County of Stanislaus, City
of Oakdale, State of California (hereinafter known as the
"Grantor(s)") hereby releases and quitclaims to Nicholas Moxley and Samuel Moxley, a
individuals residing at 5303 Bliss rd, County of Klamath, City
of Bonanza, State of Oregon (hereinafter known as the
"Grantees(s)") for the sum of Zero
(\$0) and releases all the rights, title, interest, and claim in or to the
following described real estate, situated in the County of Klamath, Oregon to-wit:

Remove general hunting rights for the next 50 years from the statutory warranty deed (2010-014202). Recorded in klamath county

12-14-2010. Legal description attached exhibit A.

To have and to hold, the same together with all and singular the appurtenances
thereunto belonging or in anywise appertaining, and all the estate, right, title, interest,
lien, equity and claim whatsoever for the said first party, either in law or equity, to the
only proper use, benefit and behoof of the said second party forever.



"BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON TRANSFERRING FEE TITLE SHOULD INQUIRE ABOUT THE PERSON'S RIGHTS, IF ANY, UNDER ORS 195.300 (Definitions for ORS 195.300 to 195.336), 195.301 (Legislative findings) AND 195.305 (Compensation for restriction of use of real property due to land use regulation) TO 195.336 (Compensation and Conservation Fund) 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 (Definitions for ORS 92.010 to 92.192) OR 215.010 (Definitions), 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 (Definitions for ORS 30.930 to 30.947), AND TO INQUIRE ABOUT THE RIGHTS OF NEIGHBORING PROPERTY OWNERS, IF ANY, UNDER ORS 195.300 (Definitions for ORS 195.300 to 195.336), 195.301 (Legislative findings) AND 195.305 (Compensation for restriction of use of real property due to land use regulation) TO 195.336 (Compensation and Conservation Fund) 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."

Kim Anne Wolfe
Grantor's Signature

KIM ANNE WOLFE
Grantor's Name

1411 PODLAR ST
Address

DAKDALE, CA. 95361
City, State & Zip

Grantor's Signature

Grantor's Name

Address

City, State & Zip

EXHIBIT A

LEGAL DESCRIPTION: Real property in the County of Klamath, State of Oregon, described as follows:

PARCEL 1:

SOUTH HALF SOUTH HALF, NORTH HALF SOUTHWEST QUARTER, SOUTH HALF NORTHWEST QUARTER OF SECTION 13, TOWNSHIP 38 SOUTH, RANGE 11 HALF EAST OF THE WILLAMETTE MERIDIAN;

PARCEL 2:

A PIECE OR PARCEL OF LAND SITUATE IN THE SOUTHWEST QUARTER NORTHEAST QUARTER AND THE NORTHWEST QUARTER SOUTHEAST QUARTER OF SECTION 13, TOWNSHIP 38 SOUTH, RANGE 11 HALF EAST OF THE WILLAMETTE MERIDIAN IN KLAMATH COUNTY, OREGON, CONTAINING 8.83 ACRES, MORE OR LESS, AND MORE PARTICULARLY DESCRIBED AS FOLLOWS: BEGINNING AT THE SOUTHWEST CORNER OF THE SAID NORTHWEST QUARTER SOUTHEAST QUARTER OF SAID SECTION 13, TOWNSHIP 38 SOUTH, RANGE 11 HALF EAST WILLAMETTE MERIDIAN, AND RUNNING NORTHERLY ALONG THE WESTERLY SIDE OF THE SAID NORTHWEST QUARTER SOUTHEAST QUARTER AND THE SOUTHWEST QUARTER NORTHEAST QUARTER OF SAID SECTION 13, 1542.5 FEET; THENCE SOUTHEASTERLY TO A POINT IN THE SOUTHERLY BOUNDARY OF THE SAID NORTHWEST QUARTER SOUTHEAST QUARTER OF SAID SECTION 13, 499.2 FEET EASTERLY FROM THE SAID POINT OF BEGINNING; THENCE WESTERLY ALONG THE SAID SOUTHERLY BOUNDARY OF THE SAID NORTHWEST QUARTER SOUTHEAST QUARTER OF SAID SECTION 13, 499.2 FEET TO THE POINT OF BEGINNING. SAVING AND EXCEPTING ANY PORTION LYING IN ROADS AND HIGHWAYS.

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

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 Stanislaus)

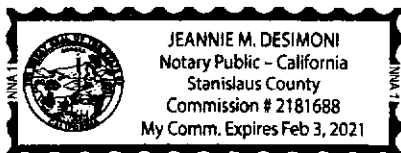
On January 26, 2021 before me, Jeannie M. DeSimoni, Notary Public
Date Here Insert Name and Title of the Officer

personally appeared Kim Anne Wolfe
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(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 Jeannie M. DeSimoni
Signature of Notary Public

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: _____ Document Date: _____

Number of Pages: _____ Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: _____

☐ Corporate Officer — Title(s): _____

☐ Partner — ☐ Limited ☐ General

☐ Individual ☐ Attorney in Fact

☐ Trustee ☐ Guardian or Conservator

☐ Other: _____

Signer Is Representing: _____

Signer's Name: _____

☐ Corporate Officer — Title(s): _____

☐ Partner — ☐ Limited ☐ General

☐ Individual ☐ Attorney in Fact

☐ Trustee ☐ Guardian or Conservator

☐ Other: _____

Signer Is Representing: _____