

THIS SPACE RESERVED FO

2021-008829

Klamath County, Oregon 06/03/2021 03:24:01 PM

Fee: \$92.00

After recording return to:	
Wyatt A. Doyle	
4730 Tingley Lane	_
Klamath Falls, OR 97603	_
Until a change is requested all tax statements shall be sent to the following address: Wyatt A. Doyle	
4730 Tingley Lane	
Klamath Falls, OR 97603	
D'1 37 450646434	_

STATUTORY WARRANTY DEED

Stephen W. Dean, Successor Trustee of the Walter E. Dean Trust,

Grantor(s), hereby convey and warrant to

Wyatt A. Doyle,

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:

Tract 2 of Imperial Acres, according to the official plat thereof of record in the office of the County Clerk of Klamath County, Oregon, EXCEPT that portion of land described as follows: Beginning at a corner common to Tracts 1 and 2 on the Westerly boundary of the secondary highway; thence in a Southerly direction 11 feet; thence in a Westerly direction 128 feet to a point on the line between Tracts 1 and 2; thence Easterly along the line between Tracts 1 and 2 to the point of beginning.

The true and actual consideration for this conveyance is \$190,000.00.

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:

Page 2 Statutory Warranty Deed Escrow No. 458646AM

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 28 day of May, 2021	
The Walter E. Dean Trust By W. Stephen W. Dean, Successor Trustee	
State of } ss County of }	
On this day of, 2021, before me, state, personally appeared Stephen W. Dean, Successor Trustee of the Waperson(s) whose name(s) is/are subscribed to the within Instrument and at IN WITNESS WHEREOF, I have hereunto set my hand and affixed my dahove written.	lter E. Dean Trust, known or identified to me to be the eknowledged to me that he/she/they executed same. official seal the day and year in this certificate first
Notary Public for the State of	
Commission Expires:	

CALIFORNIA ALL- PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

before me, Clark C. Madsen, Notary Public

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 Nevada

On May 28, 2021

personally appeared Stephen W. Dean	,			
	ctory evidence to be the person(s) whose			
name(s)(s)are subscribed to the within instrument and acknowledged to me that				
	r/their authorized capacity(ies), and that by			
	ent the person(s), or the entity upon behalf of			
which the person(s) acted, executed the	· · · · · · · · · · · · · · · · · · ·			
which the percentage detect, executed the				
I certify under PENALTY OF PERJURY	under the laws of the State of California that			
the foregoing paragraph is true and corre	ect.			
	Clark C. Madsen			
WITNESS my hand and official seal.	COMMISSION # 2297684 NOTARY PUBLIC - CALIFORNIA			
With E33 my hand and official seal.	SAN MATEO COUNTY =			
	My Comm. Expires: 15-Aug-2023			
Notary Public Signature (Not	ary Public Seal)			
•	<u> </u>			
ADDITIONAL OPTIONAL INFORMATION INSTRUCTIONS FOR COMPLETING THIS FORM This form complies with current California statutes reagarding nature wording and				
DESCRIPTION OF THE ATTACHED DOCUMENT	This form complies with current California statutes regarding notary wording and, if needed, should be completed and attached to the document. Acknowledgments			
Not the second s	from other states may be completed for documents being sent to that state so long			
TATURY VARIAN LECK	/ as the wording does not require the California notary to violate California notary law.			
(Title or description of attached document)	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 			
(Title or description of attached document continued)	must also be the same date the acknowledgment is completed.			
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 (notary public). 			
Trained of ages bounding bate	 Print the name(s) of document signer(s) who personally appear at the time of 			
	notarization.			
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)	information may lead to rejection of document recording.			
☐ Corporate Officer	 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 			
(Title)	sufficient area permits, otherwise complete a different acknowledgment form.			
☐ Partner(s)	Signature of the notary public must match the signature on file with the office of			
☐ Attorney-in-Fact	the county clerk. Additional information is not required but could help to ensure this			
☐ Trustee(s)	acknowledgment is not misused or attached to a different document.			
Other	 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).			
1015 Version www NotaryClasses com 800-873-0865	 Securely attach this document to the signed document with a staple. 			