

THIS SPACE RESERVED FOR

2021-015536

Klamath County, Oregon 10/14/2021 02:12:01 PM

Fee: \$92.00

After recording return to:
Ryan M. Killian
46373 Hwy 58
Westfir, OR 97492
Until a change is requested all tax statements shall be sent to the following address: Ryan M. Killian
_46373 Hwy 58
Westfir, OR 97492
File No. 495292AM

STATUTORY WARRANTY DEED

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

Grantor(s), hereby convey and warrant to

Ryan M. Killian,

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:

Township 36 South, Range 10 East of the Willamette Meridian, Klamath County, Oregon.

Section 14: Beginning at a point 3060 feet South and 1113 feet East of the Northwest corner of Section 14, thence North 260 feet, thence East 180 feet, thence South 200 feet, thence West 97 feet, thence South 60 feet, thence West to the point of beginning.

FOR INFORMATION PURPOSES ONLY, THE MAP/TAX ACCT #(S) ARE REFERENCED HERE:

3610-014CB-00200

The true and actual consideration for this conveyance is \$9,000.00.

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:



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.

LAWS 2009, AND SECTIONS 2 TO 7, CHAPTER 8, OREGON LAWS 2010.
Dated this 17 day of of , 2021
Michael Kincade Revocable Trust of 2014
By:
Michael Kincade, Trustee
State of
County of}
On this day of October, 2021, before me, 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 frustee.
IN WITNESS WHEREOF, Leave hereunto set my hand and affixed my official seal the day and year in this certificate first
above written. Please see attached document
Notary Public for the State of
Residing at:
Commission Expires:

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 COULTOY MA)
County of Sarramento	}
on Oct. B. Wy before me,	C. Marks, Notary Public
personally appeared \(\int \) \(\int \)	(Here inseft name and title of the officer)
	actory evidence to be the person(s) whose
name(s/) is/are subscribed to the within i	nstrument and acknowledged to me that
he/she/they executed the same in his/he	Ar/their authorized capacity(ies), and that by ent the person(s), or the entity upon behalf of
which the person(s) acted, executed the	instrument.
	X
I certify under PENALTY OF PERJURY	under the laws of the State of California that
the foregoing paragraph is true and cor	
	C. MARKS COMM, #2230641
WITNESS my hand and official seal.	SACRAMENTO COUNTY Comm Expires FEB 8, 2022
UMANES	***************************************
Notary Public Signature (No	tana Dalik Ba Carab
	tary Public Seal)
•	INSTRUCTIONS FOR COMPLETING THIS
ADDITIONAL OPTIONAL INFORMATI	ON INSTRUCTIONS FOR COMPLETING THIS This form complies with current California statutes regarding nota if needed, should be completed and attached to the document. Ackn.
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2015 Version www NotaryClasses.com 800-873-9865

Trustee(s)

Other

HIS FORM

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- off incorrect forms (i.e. o correctly indicate this
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- n file with the office of
 - 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).
- · Securely attach this document to the signed document with a staple.