

2022-011818

Klamath County, Oregon

09/30/2022 03:21:01 PM

Fee: \$102.00

THIS SPACE RESERVED FOR RECORDER'S USE

After recording return to:
Keith Michael Thompson and Kenneth David
Thompson
P.O. Box 661496
Arcadia, CA 91066
Until a change is requested all tax statements shall be sent to the following address: Keith Michael Thompson and Kenneth David Thompson
P.O. Box 661496
Arcadia, CA 91066
File No. 562286AM

STATUTORY WARRANTY DEED

Peggy J. Rust, Trustee or her Successors in Trust, under the Peggy J. Rust Living Trust dated January 6, 2006 and Rebecca Laskey, as Tenants in Common,

Grantor(s), hereby convey and warrant to

Keith Michael Thompson and Kenneth David Thompson, not as Tenants in Common, but with Right of Survivorshp,

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:

Lot 7 in Block 55 of KLAMATH FALLS FOREST STATES, HIGHWAY 66 UNIT, PLAT NO. 2, according to the official plat thereof on file in the office of the County Clerk of Klamath County, Oregon.

COUNTERSIGNED

The true and actual consideration for this conveyance is \$14,500.00.

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:

2022-2023 Real Property Taxes, a lien not yet due and payable

BEFORE SIGNING OR ACCEPTING THE INSTRUMENT, THE PERSON TRANSFERRING FEE TITLE SHOULD INQUIRE ABOUT THE PERSON'S RIGHTS, IF ANY, UNDER OR\$ 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 DESCRIBEDIN 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 <u>28th</u> day of <u>September</u> , <u>2022</u>
Peggy J. Rust Living Trust
Peggy J. Rust, Trustee
Peggy J. Rust, Trustee
State of } ss. County of }
County of}
On this day of a Notary Public in and for said
state, personally appeared <u>Peggy J. Rust</u> known or identified to me to be the person whose name is subscribed to the foregoing instrument as successor trustee of the Peggy J. Rust Living Trust, and acknowledged to me that he/she/they executed the same as
Successor Trustee.
IN WITNESS WHEREOF I have become set my hard and offined my off sixt and shall be a set of the same of
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:
There all actives I i will be
Asee attacked Catifornia actinou ledgement
Call torner

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.

County of Sak Niego }	
On Sept. 28, 3032 before me, Cannie W. Willis Notary (Here insert name and title of the officer)	
personally appeared Teagy J. Nus F	
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. CONNIE M. WILLIS Commission No. 2408470 NOTARY PUBLIC - CALIFORNIA	
SAN DIEGO COUNTY	
Commission Expires July 16, 2026	
Notary Public Signature (Notary Public Seal)	
ADDITIONAL ORTIONAL INCORMATION INSTRUCTIONS FOR COMPLETING THIS FORM	٠
ADDITIONAL OPTIONAL INFORMATION This form complies with current California statutes regarding notary wording if needed, should be completed and attached to the document. Acknowledgment	and,
from other states may be completed for documents being sent to that state so lot as the wording does not require the California notary to violate California notary	ng
law.	
signer(s) personally appeared before the notary public for acknowledgment.	
(Title or description of attached document continued) Date of notarization must be the date that the signer(s) personally appeared we must also be the same date the acknowledgment is completed.	
Number of Pages 5 Document Date Prince of Commission followed by a comma and then your title (notary public).	
• Print the name(s) of document signer(s) who personally appear at the tim notarization.	
CAPACITY CLAIMED BY THE SIGNER Individual (s) Individual (s) Individual (s) Individual (s)	
information may lead to rejection of document recording. Corporate Officer information may lead to rejection of document recording. The notary seal impression must be clear and photographically reproduced.	ible.
Impression must not cover text or lines. If seal impression smudges, re-seal sufficient area permits, otherwise complete a different acknowledgment form.	if a
Partner(s) • Signature of the notary public must match the signature on file with the office the county clerk	e of
☐ Attorney-in-Fact	this
Other S Indicate title or type of attached document, number of pages and date. Indicate the capacity claimed by the signer. If the claimed capacity	ie a
corporate officer, indicate the title (i.e. CEO, CFO, Secretary). 2015 Version www.NotaryClasses.com 800-873-9865 • Securely attach this document to the signed document with a staple.	13 A

Page 3 Statutory Warranty Deed Escrow No. 562286AM

Rebecca Laskey				!
Rebecca Laskey	_			
State of	} ss			[
County of	}			
	_,			
On this day of	, 20, befo	ore me.		a Notary Public in
and for said state, personally appeared Reb subscribed to the within Instrument and ack IN WITNESS WHEREOF, I have hereunto above written.	ecca Laskey, nowledged to n	known or identif ae that he/she/the	ied to me to be the vexecuted same	ne person(s) whose name(s) is/are
See attached Cothf- Notary Public for the State of	cate		~\	O.
Residing at: Commission Expires:				

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 Kern					
on 295c4. 2022 before me, Lisa M. Sheehy, Notary Public Here Insert Name and Title of the Officer personally appeared Reco Laskey					
	Name(s) of Signer(s)				
who proved to me on the basis of satisfactory evidento the within instrument and acknowledged to me that authorized capacity(ies), and that by his/her/their sign upon behalf of which the person(s) acted, executed the	ature(s) on the instrument the person(s), or the entity				
LISA M. SHEEHY Notary Public - California Kern County Commission # 2333530 My Comm. Expires Sep 17, 2024	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.				
Place Notary Seal and/or Stamp Above	Signature of Notary Public				
Completing this information can d	ONAL deter alteration of the document or				
	form to an unintended document.				
Title or Type of Document: Statutory Wallanty Deed					
Document Date:	Number of Pages:				
Signer(s) Other Than Named Above:	Number of Fages.				
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				

Signer is Representing: ______ Signer is Representing: _____