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THIS SPACE RESERVED FOR REC

2023-002051 Klamath County, Oregon

03/24/2023 03:52:10 PM



Fee: \$97.00

Lisa M. Strobel and Matthew P. Clay, Co-Trustees of The Clay Family Trust, dated March 23,1991 PO Box 208 Keno, OR 97627

Grantor's Name and Address

Matthew P. Clay **PO Box 208**

Grantee's Name and Address

After recording return to:

Matthew P. Clay

Keno, OR 97627

PO Box 208 Keno, OR 97627

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

Matthew P. Clay PO Box 208 Keno, OR 97627

BARGAIN AND SALE DEED

KNOW ALL MEN BY THESE PRESENTS, That Lisa M. Strobel and Matthew P. Clay, Co-Trustees of The Clay Family Trust, dated March 23,1991,

hereinafter called Grantor, for the consideration hereinafter stated, does hereby grant, bargain, sell and convey unto Matthew P. Clay,

hereinafter called Grantee, and unto Grantee's heirs, successors and assigns all of that certain real property with the tenements, hereditaments and appurtenances thereunto belonging or in any way appertaining, situated in the County of Klamath, State of Oregon, described as follows, to wit:

Lot 26 of TRACT 1428, according to the official plat thereof on file in the office of the County Clerk of Klamath County, Oregon.

The true and actual consideration paid for this transfer, stated in terms of dollars, is zero.

However, the actual consideration consists of or includes other property or value given or promised which is the whole / part of the consideration.

To Have and to Hold the same unto grantee and grantee's heirs, successors and assigns forever.

In construing this deed, where the context so requires, the singular includes the plural and all grammatical changes shall be made so that this deed shall apply equally to corporations and to individuals.

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.

In Witness Whereof, the grantor has executed this instrument this 12 day of Much, 2013; if a corporate grantor, it has caused its name to be signed and its seal if any, affixed by an officer or other person duly authorized to do so by order of its board of directors.

The Clay Family Trust, dated March 23,1991

Lisa M. Strobel, Co-Trustee

Matthew P. Clay, Co-Trustee

State of Oregon) ss County of Klamath)

On this day of March, 2023, before me, Kathleen A. Maynard a Notary Public in and for said state, personally appeared how of March, 2023, before me, Kathleen A. Maynard a Notary Public in and for said state, personally appeared how of identified to me to be the person(s) whose name(s) is/are subscribed to the within Instrument and acknowledged to me that he/she/they executed same. 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 Oregon Residing at: Klamath County

Commission Expires: March 31,2026

OFFICIAL STAMP

KATHLEEN A. MAYNARD

NOTARY PUBLIC - OREGON

COMMISSION NO. 1023161

MY COMMISSION EXPIRES MARCH 31, 2026

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.

CHAPTER 855, OREGON LAWS 2009, AND SECTIONS 2 TO 7, CHAPTER 8	
In Witness Whereof, the grantor has executed this instrument this day of corporate grantor, it has caused its name to be signed and its seal if any, affixed by an offit to do so by order of its board of directors.	; if a ; if a ; if a
The Clay Family Trust, dated March 23,1991 Co-trustee Lisa M. Strobel, Co-Trustee	
Matthew P. Clay, Co-Trustee State of} ss	
On this day of , , before me, Public in and for said state, personally appeared or identified to me to be the person(s) whose name(s) is/are subscribed to the within Instruction he/she/they executed same. IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal the databove written.	
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 California	}
County of Kern	. }
On <u>3/20/2023</u> before me,	C. Biggs, Notary Public.
personally appeared disa M.	Struber (Herrinsert name and title of the officer)
who proved to me on the basis of satisf	factory evidence to be the person(s) whose
name(s) is/are subscribed to the within	instrument and acknowledged to me that her/their authorized capacity(jes), and that by
	nent the person(s), or the entity upon behalf of
which the person(st) acted, executed th	
,	
the foregoing paragraph is true and co	Y under the laws of the State of California that
the foregoing paragraph is true and con	*****
WITNESS my hand and official seal.	C. BIGCS COMM. #2420307
(1 From	MOTARY PUBLIC - CALIFORNIA TO METERS OF THE PROPERTY OF THE PR
Notary Public Signature (N	otary Public Seal)
• (IV	•
ADDITIONAL OPTIONAL INFORMAT	INSTRUCTIONS FOR COMPLETING THIS FORM This form complies with current California statutes regarding notary wording and,
DESCRIPTION OF THE ATTACHED DOCUMENT	if needed, should be completed and attached to the document. Acknowledgments from other states may be completed for documents being sent to that state so long
Need	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.
(Title or description of attached document continued)	 Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed.
Number of Pages 2 Document Date 3/20/23	 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).
	 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
☐ Corporate Officer	 The notary seal impression must be clear and photographically reproducible.
(Title)	Impression must not cover text or lines. If seal impression smudges, re-seal if a 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 the county clerk.
☐ Attorney-in-Fact ☐ Trustee(s)	 Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document.
☐ Trustee(s)	 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).

2015 Version www.NotaryClasses.com 800-873-9865

• Securely attach this document to the signed document with a staple.