



Prepared By:

06/22/2023 01:15:46 PM

Fee: \$87.00

Name: Dan Thorndyke
Address: 199 East South Lakeview Dr.
East Peoria, IL 61611

After Recording Return To:

Name: Dan Thorndyke
Address: 199 East South Lakeview Dr.
East Peoria, IL 61611

Until a Change is Requested, Mail Tax Statements To:

Name: Sharon Thorndyke
Address: 112 East Willard St.
Cabery, IL 60919

Space above this line for recorder's use only

OREGON TRANSFER ON DEATH DEED

NOTICE TO OWNER.

You should carefully read all information on this form. You may want to consult a lawyer before using this form.

This form must be recorded before your death or it will not be effective.

IDENTIFYING INFORMATION.

Owner or Owners Making This Deed:

Owner Full Name: Justin Wayne Thorndyke Marital Status: Single
Mailing Address: 21335 Gray Wolf Ln., Sprague River OR 97624

Owner Full Name: _____ Marital Status: _____
Mailing Address: _____

Legal Description of Property:

Klamath County, OR 35S 10E - 21
KLAMATH FOREST ESTATES 1ST ADDITION, BLOCK 28, LOT 16
Map Tax Lot Number (APN): 3510-021D0-00600
Property Address: 21329 Gray Wolf Ln, Sprague River, OR 97624

KLAMATH FOREST ESTATES 1ST ADDITION, BLOCK 28, LOT 15
Map Tax Lot Number (APN): 3510-021D0-00700
Property Address: 21335 Gray Wolf Ln, Sprague River, OR 97639

[WRITE LEGAL DESCRIPTION HERE OR ATTACH EXHIBIT A]

PRIMARY BENEFICIARY. I designate the following beneficiary if the beneficiary survives me.

Full Name: Sharon Thorndyke Marital Status: Single
Mailing Address: 112 East Willard St., Cabery IL 60919

ALTERNATE BENEFICIARY (OPTIONAL). If my primary beneficiary does not survive me, I designate the following alternate beneficiary if that beneficiary survives me.

Full Name: Dan Thorndyke Marital Status: Single
Mailing Address: 199 East South Lakeview Dr., East Peoria IL 61611

TRANSFER ON DEATH. At my death, I transfer my interest in the described property to the beneficiaries as designated above. Before my death, I have the right to revoke this deed.

SPECIAL TERMS (OPTIONAL).

[WRITE SPECIAL TERMS HERE OR ATTACH EXHIBIT B]

SIGNATURES OF OWNERS MAKING THIS DEED.

Owner Signature: [Signature] Date: 6/15/2023
Printed Name: Justin Wayne Thorndyke

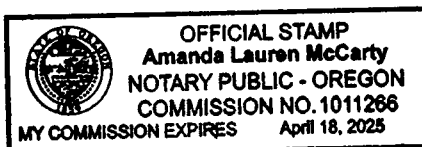
Owner Signature: _____ Date: _____
Printed Name: N/A

ACKNOWLEDGMENT.

STATE OF Oregon
COUNTY OF Jackson

I, the undersigned, a Notary Public in and for said County, in said State, hereby certify that Justin Wayne Thorndyke whose names are signed to the foregoing instrument, and who is known to me, acknowledged before me on this day that, being informed of the contents of the instrument, they executed the same voluntarily on the day the same bears date.

Given under my hand this 06/15/2023 (mm/dd/yyyy)



[Signature]
Notary Public

My Commission Expires: April 18, 2025