

## 2023-008184 Klamath County, Oregon

09/19/2023 02:30:01 PM

Fee: \$92.00

#### THIS SPACE RESERVED FOR RECORDER'S USE

After recording return to:
Farooq Sultan
2931 Front St.
Klamath Falls, OR 97601
Until a change is requested all tax statements shall be sent to the following address: Farooq Sultan
2931 Front St.
Klamath Falls, OR 97601
File No. 606279AM

### STATUTORY WARRANTY DEED

## Robert J. Szoke and Deborah T. Szoke, as Tenants by the Entirety,

Grantor(s), hereby convey and warrant to

## Farooq Sultan,

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 19, Tract 1432-QUAIL POINT ESTATES, according to the official plat thereof on file in the office of the County Clerk of Klamath County, Oregon.

The consideration paid for the transfer is \$353,500.00, PURSUANT TO AN IRC 1031 TAX DEFERRED EXCHANGE ON BEHALF OF GRANTOR/GRANTEE.

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:

2023-2024 Real Property Taxes, a lien not yet due and payable

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 195.301, 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 15th day of Veptember, 2023.	
Refr.	
Robert J. Sake	
Deborah T. Szoke	
State of	
On this day of September, 2023, before me, state, personally appeared Robert J. Szoke and Deborah T. Szoke, known or is/are subscribed to the within Instrument and acknowledged to me that be	r identified to me to be the person(s) whose name(s)
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above written.	
Notary Public for the State of	
Residing at:	
Commission Expires:	

# **CALIFORNIA ALL PURPOSE 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 Contra Costa }		
On September 15, 2023 before me ,	Tammy Kwan Notary	
Date	Insert Name and Title of the officer	
Public, personally appeared Robert J. Szoke and Deborah T. Szoke		
Name(s) of S	igner(s)	
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.  Signature:	COMM. # 2349604 COMM. # 2349604 CONTRA COSTA COUNTYO COMM. EXPIRES MAR. 1, 2025	
Though this section is optional, completing this information can deter alteration of the document or fraudulent		
attachment of this form to an unintended document.		
Description of Attached Document  Title or Type of Document:		
Capacity(ies) Claimed by Signer(s) Signers Name:	Signers Name:	
☐ Corporate Officer – Title(s)	☐ Corporate Officer – Title(s)	
□ Partner - □ Limited □ General	□ Partner - □ Limited □ General	
☐ Individual ☐ Attorney in Fact	☐ Individual ☐ Attorney in Fact	
☐ Trustee ☐ Guardian or Conservator	☐ Trustee ☐ Guardian or Conservator	
Other:	☐ Other:	
Signer is Representing: Signer is Representing:		