After Recording Return to:

John C. Urness, OSB #833413 Thorp, Purdy, Jewett, et al. 1011 Harlow Road, Suite 300 Springfield, OR 97477

Until a change is requested, send all tax statements to:

Ronald P. Bacas, Trustee 15795 Mussey Grade Rd. Ramona, CA 92065 2023-010440

Klamath County, Oregon

12/05/2023 03:52:01 PM

Fee: \$92.00

PERSONAL REPRESENTATIVE'S DEED

Ronald P. Bacas, Personal Representative of the Estate of Albert R. Bacas, deceased, Lane County Circuit Court Case No. 22PB05706, Grantor, conveys to Ronald P. Bacas, Trustee of The Bacas Estate Living Trust, Grantee, all of the interest the Estate of Albert R. Bacas has by operation of law or otherwise, in the following described real property located in Klamath County, Oregon:

THE EAST 1/2 OF THE NORTHEAST 1/4 OF THE SOUTHWEST 1/4 OF SECTION 10, TOWNSHIP 25 SOUTH, RANGE 8 EAST OF THE WILLAMETTE MERIDIAN, KLAMATH COUNTY, OREGON.

Tax Account No. 160079;

Assessor's Map Tax Lot No. 2508-01000-03100

Site Address: 3100 TL Schoonover 1, Crescent City, 97733

SUBJECT TO AND EXCEPTING: Covenants, Conditions, Restrictions, and Easements of Record.

Copies of the death certificates of Albert R. Bacas and Gerda Bacas are attached hereto.

The true and actual consideration for this conveyance is: \$0; Distribution from Estate.

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 INOUIRE 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, AND SECTIONS 2 TO 9 AND 17. CHAPTER 855, OREGON LAWS 2009, AND SECTIONS 2 TO 7, CHAPTER 8, OREGON LAWS 2010.

Notarial Acknowledgement on Next Page

DATED this 1st day of december 2023.

Estate of Albert R. Bacas, deceased

Ronald P. Bacas, Personal Representative

STATE OF CALIFORNIA)			
County of) ss. _)			
The above instrumen of the Estate of Albert R. Ba	nt was acknowled	edged before me by Roon this day of	onald P. Bacas, Persona	d Representative _, 2023.
		Notary Public for Ca My Commission Ex		_
PATache	d			
Noto	any			

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 San Diego County of _ Nicole Pfeiffer, Notary Public before me. Here Insert Name and Title of the Officer personally appeared Name(s) of Signer(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 NICOLE PFEIFFER paragraph is true and correct. otary Public - California San Diego County WITNESS my hand and official seal. Commission # 2429329 Comm. Expires Dec 13, 2026 Place Notary Seal and/or Stamp Above OPTIONAL Completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document. Description of Attached Document Title or Type of Document: **Document Date:** Number of Pages: Signer(s) Other Than Named Above: Capacity(ies) Claimed by Signer(s) Signer's Name: Signer's Name: ☐ Corporate Officer — Title(s): □ Corporate Officer – Title(s): □ Partner - □ Limited □ General □ Partner - □ Limited □ General

□ Individual

Signer is Representing:

□ Trustee

☐ Other:

□ Attorney in Fact

□ Guardian or Conservator

Signer is Representing: _

☐ Attorney in Fact

☐ Guardian or Conservator

□ Individual

□ Trustee

□ Other: