7 O	

NO PART OF ANY STEVENS-NESS FORM MAY BE REPRODUCED IN ANY FORM OR BY ANY ELECTRONIC OR MECHANICAL MEANS.



ANIJ C. WILKERSON

3870 STURDINANT ANE;

KLAMATH FALLS

DR 97603

After recording, return to (Name and Address):

Until requested otherwise, send all tax statements to

(Name and Address):

ANN C WILKERSON

3870 STURNIANT AVE,

IKLAMATH FASSS

OR 976-3

2024-002918 Klamath County, Oregon

04/17/2024 03:56:25 PM

Fee: \$92.00

(SPACE RESERVED FOR RECORDER'S USE)

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. (Type or legibly print all information.)

TRANSFER ON DEATH DEED

I. AWN	WILKERSON	
whose mailing address is	3870 STUR PWAN	1 AVE.
whose manning under the in-	KLAMATH FALLS	
	OR 976A3	, owner of the rea
property described below, in that certain real property	upon my death, do hereby transfer to the b	beneficiary designated below, all of my right, interest and title relating thereto, situated in
County, State of Oregon, le	gally described (check one): ' as set forth	n on the attached Exhibit A, and incorporated by this reference
□ as follows:	- '	

I designate	WAYNE	D. WILKERSON	BARN APRILL 1972	
whose mailing address,	if available, is	SO28 HEMPHI	L DRIVE ST. DEYMPIA, A 198513	
as my primary beneficia	ry* if that person s			
(Optional) I desi	gnate KY4	E WILKERSON	S BARN: DECEMBER 12, 1990	'e
			HILL DRIVESE, OLIMAA NA 98513	
as my alternate benefici			NR 48012	

\*ORS 93.961(2) requires that the beneficiary or beneficiaries must be specifically identified by name, rather than as part of a class.

\*\*ORS 93.953(2) states that an individual may designate one or more alternate beneficiaries if the primary beneficiary or beneficiaries are not qualified to take the property at the time of death or do not survive the transferor.

PUBLISHER'S NOTE: ORS chapter 93 provides that Transfer on Death deeds: (a) Transfer only property that the transferor still owns at time of death, and transfer equal shares with no right of survivorship when multiple beneficiaries are named (93.969); (b) Are always revocable (93.955); (c) Must be recorded before death to be effective (93.961), but do not need to be delivered to designated beneficiaries (93.963); (d) Transfer property without any warranties or covenants of title and subject to the debts of the decedent as well as any liens, mortgages and/or other interests to which the property is subject at time of death (93.969).

S-N Form No. 1336 - Transfer on Death Deed - Page 1 of 2

## EXHIBIT, A

## Klamath County, Oregon



11/01/2018 02:04:30 PM

Fee: \$82.00

## TRANSFER ON DEATH DEED

Until a change is requested, the county clerk shall send tax statements to the following address: Ann Wilkerson

3870 Sturdivant Ave. Klamath Falls, OR 97603

Owner or Owners Making This Deed:

Printed name: Ann Wilkerson

Mailing address: 3870 Sturdivant Ave., Klamath Falls, Oregon 97603

Legal description of the property:

The Easterly 30 feet of Lot 14 and the Westerly 45 feet of Lot 15, Burnsdale, according to the official plat thereof on file in the office of the County Clerk of Klamath County, Oregon. Klamath County Tax Account # 3909-10DB-8560

I designate the following beneficiaries equally if the beneficiary survives me:

Printed name: Wayne David Wilkerson;

Born: April 1, 1972

Kisa Ann Keiser;

Born: June 30, 1992

Kyle Wilkerson;

Born: December 12, 1996

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.

After recording, the county clerk shall return the deed to: Ann Wilkerson

Signature: Ina Cusale. Date: 11-1-18

State of Oregon

County of Klamath

This instrument was acknowledged before me on November /, 2018 by Ann Wilkerson.

OFFICIAL STAMP MARK L RUNNELS NOTARY PUBLIC - OREGON COMMISSION NO. 964375

Notary Public for Oregon

My Commission Expires: 7/18/2021

Before my death, I have the right to revoke this deed.
(Optional) SPECIAL TERMS:
In construing this instrument, where the context so requires, the singular includes the plural.
IN WITNESS WHEREOF, the undersigned has executed this instrument on APRIL To 2024
ann a withor
STATE OF OREGON, County ofKlaryath)ss.  This record was acknowledged before me onKprill, 2024  byKlrson
OFFICIAL STAMP Jusa M Kessler
LISA MARIE KESSLER NOTARY PUBLIC - OREGON COMMISSION NO. 1029892  Notary Public for Oregon My commission expires  OCTBVEY  TO 120  A D D D  OCTBVEY  TO 120  T
MY COMMISSION EXPIRES OCTOBER 17, 2026