UNTIL A CHANGE IS REQUESTED, ALL TAX STATEMENTS SHALL BE MAILED TO:

Geoffrey A. Haffner Personal Representative 4627 SE 49th Ave. Portland, OR 97206

AFTER RECORDING, PLEASE RETURN TO:

Kueny Law LLC 3040 Commercial St. SE Suite 135 Salem, Oregon 97302

2024-003377 Klamath County, Oregon 05/02/2024 08:07:02 AM

Fee: \$97.00

PERSONAL REPRESENTATIVE'S DEED

GEOFFREY A. HAFFNER, the duly appointed, qualified and acting Personal Representative of the estate of ROXIE ANN HAFFNER, deceased, pursuant to probate proceedings filed in the Circuit Court of the State Oregon for the County of Marion, Case No. 23PB03964, Grantor, conveys to GEOFFREY A. HAFFNER and RENEE D. HAFFNER, as tenants in common, Grantees, the following described real property in the County of Klamath, State of Oregon, free of encumbrances, except as specifically set forth herein:

S415 Ft. of the W1050 Ft. of

Lot(s) 11, Block 17

Klamath Falls Forest Sycan Unity

Commonly known as Lot 11D, Block 17, Sycan Unit Account # 17625

The true and actual consideration paid for this transfer is \$0.00. The purpose of this transfer is to convey interest in the real property to the beneficiaries of the ESTATE OF ROXIE ANN HAFFNER. ROXIE ANN HAFFNER was the sole owner of the above-mentioned property at the time of her death through right of survivorship. Her spouse, WILLIAM DALE HAFFNER's death certificate is attached hereto.

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:

BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON TRANSFERRING FEE TITLE SHOULD INQUIRE ABOUT THE PERSONS 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 AND 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 25th day of April, 2024.

GEOFFREY A. HAFFNER

Personal Representative

ESTATE OF ROXIE ANN HAFFNER

STATE OF OREGON)

) ss.

County of Marion

On April 25, 2024 personally appeared the above-named GEOFFREY A. HAFFNER and acknowledged the foregoing instrument to be his voluntary act. Before me:

OFFICIAL STAMP
BRYANDA MARIA QUEVEDO LEMUS
NOTARY PUBLIC-OREGON
COMMISSION NO. 1045111
MY COMMISSION EXPIRES FEBRUARY 7, 2028

Notary Public for Oregon





OREGON HEALTH AUTHORITY CENTER FOR HEALTH STATISTICS

	LEL IAG NO.	**************************************	OFWILLOW	D-41111	27/27	DIME FILE HOMOEN
T.	1. Legal Name First William	/ Middle Dale	Last Haffner	.00	Suffix	2. Death Date
d.	eriði Aði Ladi Ladi	740 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7			Aka Bill	October 24, 2022
7	3. Sex 4. Ag Male	e 6. Soci 77 years	al Security Number		6. County of De Marion	<u>1 Away - Book a</u>
ÿ }	July 19, 1945	8. Birthplace Salem, Oregon			9. Decedent's E Bachelor	s degree
	 Was Decedent of Hispanic Origin NO 		11. Decedent's Race(s) White			s Decedent Ever in S. Armed Forces? Yes
ETED BY FUNERAL FACILI	13. Residence: Number and Sires 808 Park Place		**	14, City/Town Monmouth		• •
2	15. Residence County	Oregon		17. Zip Code + 4 97361		18. Inside City Limits? Yes
	 Marital Status at Time of Death Married 		Spouse's Name Prior to First M Roxie Ann Mathews	11.000 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 (m (m) 2 (m) 2 (m)	
ğ	21. Usual Occupation Technical Writer			22. Kind of Busine Technology	· · · · · · · · · · · · · · · · · · ·	
	23. Father's Name Herman Haffner	AND AND AND	Aln	other's Name Prior to Fi na Nusz	y <u>1200</u> ,	
Ē	25. Informant's Name Geoffrey Haffner	26. Telephone Not Availab	lumber 27. Relationship to De Son	28. Mailing Ad 4627 SE 4	^{idress} 9th Avenue, I	Portland, OR 97226
BE COMPI	29. Place of Death Hospital-Inpatient		30. Facility Name Salem Hospital		AAR IIA AARAA	, (1) (4) (4) (4)
0	31. Location of Death 890 Oak Street SE		32. City/Town or Loca Salem	tion of Death	33. State Oregon	34/ Zip Code + 4 97301
Ø	35. Method of Disposition Cremation	36. Place of Dispo	remation Center		37. Location Keizer, Ore	gon
	I. Name and Complete Address of Funeral Facility. Farnstrom Mortuary , 410 Monmouth St, Independence, Oregon 97351					
# <u>.</u>	39. Date of Disposition / November 07, 2022	40. Funeral Directo	or's Signature Andrew A Phillips	Electronical Signal	FS-056	
	42. Register's Signature		43. Date Ro		"2	cat Elle Number 1 9 4
	45. Amendment	100 A	Control Contro			Mit We own in



7615424

I CERTIFY THAT THIS IS A TRUE AND CORRECT COPY OF THE ORIGINAL CERTIFICATE ON FILE OR THE VITAL RECORDS FACTS ON FILE IN THE OREGON CENTER FOR HEALTH STATISTICS.

NOV 1 6 2022

NOV 1 6 2022

JENNIER A. WOODWARD, Ph.D.



* 0 0 7 9 0 0 2 4 5 *

007900245