

Returned at Counter
Kat's Deed Reposition

2024-006877

Klamath County, Oregon



003320202400068770050057

08/07/2024 09:02:30 AM

Fee: \$102.00

RECORDING COVER SHEET

ORS 205.234

This cover sheet has been prepared by:

Any error in this cover sheet DOES NOT affect the transaction(s) contained in the instrument itself.

Reference: _____

Please print or type information.

1. AFTER RECORDING RETURN TO –

Required by ORS 205.180(4) & 205.238:

Name: **Ray & Alexis Wiser**
c/o Wayne O. and Janet M.
Turner

Address: **4370 Lake Earl Drive**

City, ST Zip: **Crescent City, CA 95531**

2. TITLE(S) OF THE TRANSACTION(S) – Required by ORS 205.234(1)(a)

Note: "Transaction" means any action required or permitted by law to be recorded, including, but not limited to, any transfer, encumbrance or release affecting title to or an interest in real property. Enter descriptive title for the instrument:

Document Title(s): **Warranty Deed**

3. DIRECT PARTY / GRANTOR Names and Addresses – Required by ORS 205.234(1)(b)
for Conveyances list Seller; for Mortgages/Liens list Borrower/Debtor

Grantor Name: **Ray and Alexis Wiser**

Grantor Name: _____

4. INDIRECT PARTY / GRANTEE Names and Addresses – Required by ORS 205.234(1)(b)
for Conveyances list Buyer; for Mortgages/Liens list Beneficiary/Lender/Creditor

Grantee Name: **Tim McDermott**

Grantee Name: _____

5. For an instrument conveying or contracting to convey fee title, the information required by ORS 93.260:

UNTIL A CHANGE IS REQUESTED, ALL TAX STATEMENTS SHALL BE SENT TO THE FOLLOWING ADDRESS:

Name: **Tim Mc Dermott**

Address: **PO Box 151**

City, ST Zip: **Chiloquin, OR 97624**

6. TRUE AND ACTUAL CONSIDERATION – Required by ORS 93.030 for an instrument conveying or contracting to convey fee title or any memorandum of such instrument:

\$ 0.00

7. TAX ACCOUNT NUMBER OF THE PROPERTY if the instrument creates a lien or other interest that could be subject to tax foreclosure. – Required by ORS 312.125(4)(b)(B)

Tax Acct. No.: **R227935**

****RERECORDED AT THE REQUEST OF THE GRANTOR TO CORRECT THE LEGAL DESCRIPTION PREVIOUSLY RECORDED AS 2019-006335****



STATE OF OREGON)
County of KLAMATH)
I CERTIFY that this is a true and correct
copy of a document in the possession
of the Klamath County Clerk.

Dated: Aug 7th, 2024
ROCHELLE LONG, Klamath County Clerk
By: Kalani Commure, Deputy

2019-006335

Klamath County, Oregon



00241666201900063350030032

06/06/2019 10:40:35 AM

Fee: \$92.00

Returned at Counter

Recording requested by: TIM McDERMOTT Space above reserved for use by Recorder's Office

When recorded, mail to: AND TAX STATEMENTS Document prepared by:

Name: Mr Tim McDermott

Name _____

Address: PO Box 151
Chiloquin, OR 97624

Address _____

City/State/Zip: Chiloquin, OR 97624

City/State/Zip _____

Property Tax Parcel/Account Number: TRACT 1053, BLOCK 5 - LOT 17

PROP I. D. 227935 OREGON SHORES #1 SUBDIVISION

Warranty Deed

This Warranty Deed is made on May 27, 2019, between RAY + ALEXIS WISER,

Grantor, of 20 Rollingwood Dr #54, City of

JACKSON, State of CALIFORNIA, and

TIM McDERMOTT, Grantee, of P.O. Box 151

, City of Chiloquin, State of OREGON

For \$1500.00 BS-L17

For valuable consideration, the Grantor hereby sells, grants, and conveys the following described real estate, in fee simple, to the Grantee to have and hold forever, along with all easements, rights, and buildings belonging to the described property, located at PARK VIEW DRIVE

, City of Chiloquin, State of OREGON:

The Grantor warrants that it is lawful owner and has full right to convey the property, and that the property is free from all claims, liabilities, or indebtedness, and that the Grantor and its successors will warrant and defend title to the Grantee against the lawful claims of all persons. Taxes for the tax year of N/A shall be prorated between the Grantor and Grantee as of the date of recording of this deed.

2018 TAX DUE \$75.43 TO BE PAID by Tim McDermott

LF602 Warranty Deed Pg.1 (12-12)

Dated: 6/03/2019

 
Signature of Grantor

Ray A Wiser Alexis L. Wiser
Name of Grantor

 
Signature of Witness #1 Printed Name of Witness #1

 Makayla Hoyopatu
Signature of Witness #2 Printed Name of Witness #2

State of _____ County of _____

On _____, the Grantor, _____,

personally came before me and, being duly sworn, did state, acknowledge and prove that he/she is the person described in the above document and that he/she signed the above document in my presence.

Notary Signature

SEE ATTACHED
NOTARY

Notary Public,

In and for the County of _____ State of _____

My commission expires: _____ Seal

Send all tax statements to Grantee.

■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■
Mr Tim McDermott
PO Box 151
Chiloquin, OR 97624
■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■

CALIFORNIA ACKNOWLEDGMENT

CIVIL CODE § 1189

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 Amador

On June 3rd 2019

before me,

Steven P. Taylor, Notary Public

Date

Here Insert Name and Title of the Officer

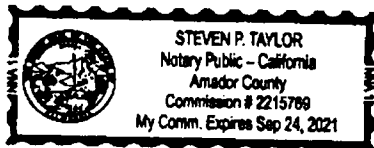
personally appeared Alexis Lee Wiser and Ray Alden Wiser

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 paragraph is true and correct.

WITNESS my hand and official seal.



Place Notary Seal and/or Stamp Above

Signature

Steven P. Taylor

Signature of Notary Public

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: Warranty Deed

Document Date: 5-27-19

Number of Pages: 2

Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: _____

☐ Corporate Officer – Title(s): _____

☐ Partner – ☐ Limited ☐ General

☐ Individual ☐ Attorney in Fact

☐ Trustee ☐ Guardian or Conservator

☐ Other: _____

Signer is Representing: _____

Signer's Name: _____

☐ Corporate Officer – Title(s): _____

☐ Partner – ☐ Limited ☐ General

☐ Individual ☐ Attorney in Fact

☐ Trustee ☐ Guardian or Conservator

☐ Other: _____

Signer is Representing: _____

Corrected Legal Description
Exhibit "A"

Lot 17, Block 5, OREGON SHORES TRACT 1053, according to the official plat thereof on file in the office of the County Clerk of Klamath County, Oregon.

APN 3507-006CA-00800