

THIS SPACE RESERVED FOR RECORDER'S USE

After recording return to: Christopher Starks 15 SE 11th St. Unit 13 Pendleton, OR 97801

Until a change is requested all tax statements shall be sent to the following address: Christopher Starks 15 SE 11th St. Unit 13 Pendleton, OR 97801 File No. 671309AM

STATUTORY WARRANTY DEED

David L. Welling,

Grantor(s), hereby convey and warrant to

Christopher Starks,

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 16, Block 2, Oregon Pines, according to the official plat thereof on file in the office of the County Clerk, Klamath County, Oregon.

FOR INFORMATION PURPOSES ONLY, THE MAP/TAX ACCT #(S) ARE REFERENCED HERE:

3511-015C0-04100

The true and actual consideration for this conveyance is \$4,800.00.

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:

Real property taxes due, if any, but not yet 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 195.300, 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.

Dated: March 10, 2025

David L. Welling

State of _____ } ss County of _____ }

On this ______day of ______, 2025, before me, ______a Notary Public in and for said state, personally appeared David L. Welling , known or identified to me to be the person(s) whose name(s) is/are subscribed to the within Instrument and acknowledged to me that he/she/they executed same.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal the day and year in this certificate first above written.

SEC ATTACIJED CAMFORNIA ACK.

Notary Public for the State of ______ Residing at: ______ Commission Expires:

CALIFORNIA ACKNOWLEDGMENT

CIVIL CODE § 1189

籺踜鐌摙遻鵋粚垬虣椬閯**娦顮蔛瘷騘嶜黺**軪矀瘷鯬轞篃凨斔顀珻撱蒅穬蘷囒儹僶恖嗀訉繎祡炞挮撽敳沝衑遻擳攅葕裶藧娞鋞毢憗臔譈榝儹豂擛擛**摥**鐌褅迼蘠槒夣礢磸礯韺穬蘷顀焝礟銌

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	ANGELE	5	}				
on MARCH	12, FOX t	pefore me,	KOSA	M. SAW	DM/	NDARY PUR	
personally appeared	JAUD 1	L.	Well	NG		Nana subasa wana mana sa	MANUALAN 1
			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.

ROSA M. SANDOVAL Notary Public - California Los Angeles County Commission # 2447642 My Comm. Expires May 21, 2027	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						
Place Notary Seal and/or Stamp Above	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:							
Document Date:	Number of Pages:						
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	Corporate Officer – Title(s): Partner – Limited General Individual Attorney in Fact						
□ Trustee □ Guardian or Conservator □ Other: Signer is Representing:	Other:						

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