



THIS SPACE RESERVED FOR RECORDER'S USE

2025-004281  
Klamath County, Oregon  
06/05/2025 11:54:02 AM  
Fee: \$102.00

After recording return to:

William R. Hallmark  
2201 Arthur St.  
Klamath Falls, OR 97603

Until a change is requested all tax statements shall be

sent to the following address:

William R. Hallmark  
2201 Arthur St.  
Klamath Falls, OR 97603

File No. 1000462

## STATUTORY WARRANTY DEED

**Megan Samples and Christopher Piatt**, Grantor(s), hereby convey and warrant to

**William R. Hallmark**,

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:

**A portion of Lot A of the Re-Subdivision of ENTERPRISE TRACTS NO. 24, according to the official plat thereof on file in the office of the County Clerk of Klamath County, Oregon, more particularly described as follows:**

**Beginning on the West line of Lot A of the Re-Subdivision of ENTERPRISE TRACTS NO. 24, Klamath County, Oregon, 675 feet South of the Northwest corner of said Lot A; thence South along the West line of said Lot A, 75 feet; thence East 299.5 feet; thence North 75 feet; thence West 299.5 feet to the place of beginning.**

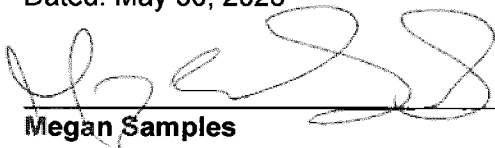
**The true and actual consideration for this conveyance is \$175,000.00.**

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: May 30, 2025

  
\_\_\_\_\_  
**Megan Samples**

State of \_\_\_\_\_ } ss  
County of \_\_\_\_\_ }

On this \_\_\_\_\_ day of June , 2025, before me, \_\_\_\_\_, a  
Notary Public in and for said state, personally appeared Megan Samples, known or identified to me to be  
the person(s) whose name(s) is/are subscribed to the within Instrument and acknowledged that  
he/she/they executed the 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.

*Loose Certificate Attached*

\_\_\_\_\_  
Notary Public for the State of \_\_\_\_\_  
Residing at: \_\_\_\_\_  
Commission Expires: \_\_\_\_\_

\_\_\_\_\_  
**Christopher Piatt**

State of \_\_\_\_\_ } ss  
County of \_\_\_\_\_ }

On this \_\_\_\_\_ day of June , 2025, before me, \_\_\_\_\_, a  
Notary Public in and for said state, personally appeared Christopher Piatt known or identified to me to be  
the person(s) whose name(s) is/are subscribed to the within Instrument and acknowledged that  
he/she/they executed the 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.

\_\_\_\_\_  
Notary Public for the State of \_\_\_\_\_  
Residing at: \_\_\_\_\_  
Commission Expires: \_\_\_\_\_

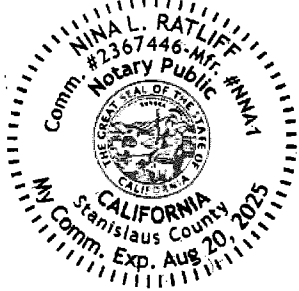
CALIFORNIA ACKNOWLEDGMENT

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 Stanislaus }  
On June 2, 2025 before me, Nina L. Ratliff, Notary Public  
Date Here Insert Name and Title of the Officer  
personally appeared Megan Samples  
Name(s) of Signer(s)  
none

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.



Place Notary Seal and/or Stamp Above

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 Nina L. Ratliff  
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: Statutory Warranty Deed  
Document Date: 5/30/2025 Number of Pages: 3  
Signer(s) Other Than Named Above: none

**Capacity(ies) Claimed by Signer(s)**

|  |  |
|--|--|
| Signer's Name: _____   | Signer's Name: _____   |
| <input type="checkbox"/> Corporate Officer – Title(s): _____   | <input type="checkbox"/> Corporate Officer – Title(s): _____   |
| <input type="checkbox"/> Partner – <input type="checkbox"/> Limited <input type="checkbox"/> General | <input type="checkbox"/> Partner – <input type="checkbox"/> Limited <input type="checkbox"/> General |
| <input type="checkbox"/> Individual <input type="checkbox"/> Attorney in Fact                        | <input type="checkbox"/> Individual <input type="checkbox"/> Attorney in Fact                        |
| <input type="checkbox"/> Trustee <input type="checkbox"/> Guardian or Conservator                    | <input type="checkbox"/> Trustee <input type="checkbox"/> Guardian or Conservator                    |
| <input type="checkbox"/> Other: _____  | <input type="checkbox"/> Other: _____  |
| Signer is Representing: _____  | Signer is Representing: _____  |

Dated: May 30, 2025

\_\_\_\_\_  
**Megan Samples**

State of \_\_\_\_\_ } ss  
County of \_\_\_\_\_ }

On this \_\_\_\_\_ day of June , 2025, before me, \_\_\_\_\_, a  
Notary Public in and for said state, personally appeared Megan Samples, known or identified to me to be  
the person(s) whose name(s) is/are subscribed to the within Instrument and acknowledged that  
he/she/they executed the 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.

\_\_\_\_\_  
Notary Public for the State of \_\_\_\_\_  
Residing at: \_\_\_\_\_  
Commission Expires: \_\_\_\_\_

  
\_\_\_\_\_  
**Christopher Piatt**

State of \_\_\_\_\_ } ss  
County of \_\_\_\_\_ }

On this \_\_\_\_\_ day of June , 2025, before me, \_\_\_\_\_, a  
Notary Public in and for said state, personally appeared Christopher Piatt known or identified to me to be  
the person(s) whose name(s) is/are subscribed to the within Instrument and acknowledged that  
he/she/they executed the 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.

\_\_\_\_\_  
Notary Public for the State of \_\_\_\_\_  
Residing at: \_\_\_\_\_  
Commission Expires: \_\_\_\_\_

Loose Certificate Attached

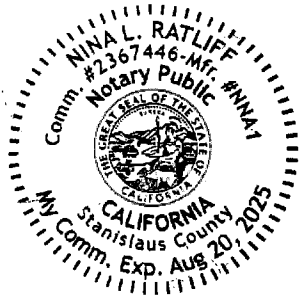
CALIFORNIA ACKNOWLEDGMENT

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 Stanislaus }  
On June 3, 2025 before me, Nina L. Ratliff, Notary Public,  
Date Here Insert Name and Title of the Officer  
personally appeared Christopher Piatt  
Name(s) of Signer(s)  
none

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.



Place Notary Seal and/or Stamp Above

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 Nina L. Ratliff  
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: Statutory Warranty Deed  
Document Date: 5/30/2025 Number of Pages: 3  
Signer(s) Other Than Named Above: none

**Capacity(ies) Claimed by Signer(s)**

|  |  |
|--|--|
| Signer's Name: _____   | Signer's Name: _____   |
| <input type="checkbox"/> Corporate Officer – Title(s): _____   | <input type="checkbox"/> Corporate Officer – Title(s): _____   |
| <input type="checkbox"/> Partner – <input type="checkbox"/> Limited <input type="checkbox"/> General | <input type="checkbox"/> Partner – <input type="checkbox"/> Limited <input type="checkbox"/> General |
| <input type="checkbox"/> Individual <input type="checkbox"/> Attorney in Fact                        | <input type="checkbox"/> Individual <input type="checkbox"/> Attorney in Fact                        |
| <input type="checkbox"/> Trustee <input type="checkbox"/> Guardian or Conservator                    | <input type="checkbox"/> Trustee <input type="checkbox"/> Guardian or Conservator                    |
| <input type="checkbox"/> Other: _____  | <input type="checkbox"/> Other: _____  |
| Signer is Representing: _____  | Signer is Representing: _____  |