

2025-005792

Klamath County, Oregon

Grantor:
Mandy Tyler
24545 Sprague River Rd
Sprague River, OR 97639



00344378202500057920030038

07/08/2025 12:21:05 PM

Fee: \$97.00

Grantee:
Mandy Tyler, Trustee
Mandy R. Tyler Trust
24545 Sprague River Rd
Sprague River, OR 97639

WARRANTY DEED

Mandy Tyler, Grantor, who took title with Christian Tyler (deceased, death certificate attached) not as tenants in common but with rights of survivorship, conveys and warrants to Mandy R. Tyler, Trustee, or successors in trust, of the Mandy R. Tyler Trust dated July 2nd, 2025, Grantee, the following described real property situated in Klamath County, State of Oregon:

See Legal Description attached hereto as Exhibit A and by this reference incorporated herein,

This property is subject to all liens, easements, and encumbrances of record, if any, as of the date of this deed, including any real property taxes due, 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.

THE LIABILITY AND OBLIGATIONS OF GRANTOR TO GRANTEE AND GRANTEE'S HEIRS AND ASSIGNS UNDER THE WARRANTIES AND COVENANTS CONTAINED HEREIN OR PROVIDED BY LAW SHALL BE LIMITED TO THE EXTENT OF COVERAGE THAT WOULD BE AVAILABLE TO GRANTOR UNDER A STANDARD POLICY OF TITLE INSURANCE CONTAINING EXCEPTIONS FOR MATTERS OF PUBLIC RECORD. IT IS THE INTENTION OF GRANTOR TO PRESERVE ANY EXISTING TITLE INSURANCE COVERAGE. THE LIMITATIONS CONTAINED HEREIN EXPRESSLY DO NOT RELIEVE GRANTOR OF ANY LIABILITY OR OBLIGATIONS UNDER THIS INSTRUMENT, BUT MERELY DEFINE THE SCOPE, NATURE, AND AMOUNT OF SUCH LIABILITY OR OBLIGATIONS.

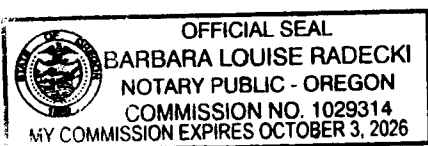
The consideration for this deed is estate planning. Unless a change is requested, all tax statements shall be sent to above named Grantee at the following address: 24545 Sprague River Rd., Sprague River, OR 97639.

DATED this 1st day of July, 2025.

STATE OF OREGON)
County of Klamath) ss.

Mandy Tyler Grantor

On this 1st day of July, 2025, personally appeared Mandy Tyler, Grantor and acknowledged the foregoing instrument to be her voluntary act and deed.



Notary Public for Oregon

RECORD AND RETURN TO:
ETLAW LLC
1001 SW Disk Drive, Suite 250
Bend, OR 97702

EXHIBIT "A"

Real property in the County of Klamath, State of Oregon, described as follows:

PARCEL 1:

THE EAST HALF OF GOVERNMENT LOTS 2, 7, AND 10 AND ALL OF GOVERNMENT LOTS 1 AND 8 ALL IN SECTION 14, TOWNSHIP 36 SOUTH, RANGE 10 EAST OF THE WILLAMETTE MERIDIAN, IN THE COUNTY OF Klamath, STATE OF OREGON

EXCEPTING THEREFROM THAT PORTION OF LOT 10 LYING WITHIN THE LIMITS OF THE SPRAGUE RIVER HIGHWAY AS CONVEYED TO Klamath COUNTY BY DEED RECORDED APRIL 23, 1929 IN BOOK 85, PAGE 618, DEED RECORDS OF Klamath COUNTY, OREGON

ALSO EXCEPTING THEREFROM ANY PORTION THEREOF LYING WITH THE LIMITS OF THE OREGON-CALIFORNIA AND EASTERN RAILWAY COMPANY RIGHT OF WAY.

PARCEL 2:

THE WESTERLY 11.8 FEET OF THE WEST HALF OF GOVERNMENT LOT 9, SECTION 14, TOWNSHIP 36 SOUTH, RANGE 10 EAST OF THE WILLAMETTE MERIDIAN, IN THE COUNTY OF Klamath STATE OF OREGON.

This legal description was created prior to January 1, 2008

Tax Parcel Number: R873832 and R331117 and R330877

**RECORD AND RETURN TO:
ETLAW LLC
1001 SW Disk Drive, Suite 250
Bend, OR 97702**

CERTIFICATION OF VITAL RECORD

COUNTY OF HUMBOLDT

EUREKA, CALIFORNIA 95501

3052023266205

CERTIFICATE OF DEATH

3202312001283

STATE FILE NUMBER		LOCAL REGISTRATION NUMBER	
1. NAME OF DECEDENT - FIRST (Given) CHRISTIAN		3. LAST (Family) TYLER	
2. MIDDLE IAN		4. DATE OF BIRTH mm/dd/yyyy 11/04/1975	
AKA, ALSO KNOWN AS - Include full AKA (FIRST, MIDDLE, LAST)		5. AGE Yrs. 48	
9. BIRTH STATE/FOREIGN COUNTRY CA		12. MARITAL STATUS/SRDP (at Time of Death) DIVORCED	
10. SOCIAL SECURITY NUMBER		7. DATE OF DEATH mm/dd/yyyy 11/29/2023	
11. EVER IN U.S. ARMED FORCES? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK		8. HOUR (24 Hours) 2152 FND	
13. EDUCATION - Highest Level/Degree (see worksheet on back) SOME COLLEGE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		16. DECEDENT'S RACE - Up to 3 races may be listed (see worksheet on back) WHITE	
14/15. WAS DECEDENT HISPANIC/LATINO/SPANISH? (if yes, see worksheet on back) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		19. YEARS IN OCCUPATION 30	
17. USUAL OCCUPATION - Type of work for most of life. DO NOT USE RETIRED HEAVY EQUIPMENT OPERATOR		18. KIND OF BUSINESS OR INDUSTRY (e.g., grocery store, road construction, employment agency, etc.) HEAVY MACHINERY	
20. DECEDENT'S RESIDENCE (Street and number, or location) 24545 SPRAGUE RIVER ROAD			
21. CITY SPRAGUE RIVER		25. STATE/FOREIGN COUNTRY OR	
22. COUNTY/PROVINCE KLAMATH		23. ZIP CODE 97639	
24. YEARS IN COUNTY 2		26. INFORMATION NAME, RELATIONSHIP MORGAN TYLER, DAUGHTER	
27. INFORMANT'S MAILING ADDRESS (Street and number, or rural route number, city or town, state and zip) 3042 NORTH VALLEY ROAD, GREENVILLE, CA 95947		28. NAME OF SURVIVING SPOUSE/SRDP - FIRST -	
29. MIDDLE -		30. LAST (BIRTH NAME) -	
31. NAME OF FATHER/PARENT - FIRST JAMES		32. MIDDLE IAN	
33. NAME OF MOTHER/PARENT - FIRST MANDY		34. BIRTH STATE CA	
35. MIDDLE RHODES		36. BIRTH STATE CA	
37. LAST (BIRTH NAME) PEACOCK		38. DISPOSITION DATE mm/dd/yyyy 12/08/2023	
39. PLACE OF FINAL DISPOSITION RESIDENCE OF MORGAN ALLISON TYLER 3042 NORTH VALLEY ROAD, GREENVILLE, CA 95947		40. TYPE OF DISPOSITION(S) CREMATE/TRANSIT/RESIDENCE	
41. SIGNATURE OF EMBALMER NOT EMBALMED		42. LICENSE NUMBER -	
43. NAME OF FUNERAL ESTABLISHMENT HUMBOLDT CREMATION AND FUNERAL SERVICE INC.		44. LICENSE NUMBER FD1963	
45. SIGNATURE OF LOCAL REGISTRAR CANDY STOCKTON, MD		46. DATE mm/dd/yyyy 12/07/2023	
47. PLACE OF DEATH RESIDENCE		102. IF HOSPITAL, SPECIFY ONE <input type="checkbox"/> P <input type="checkbox"/> EVOP <input type="checkbox"/> DOA	
103. IF OTHER THAN HOSPITAL, SPECIFY ONE <input type="checkbox"/> Nursing Home/LTC <input checked="" type="checkbox"/> Decedent's Home <input type="checkbox"/> Other		104. COUNTY HUMBOLDT	
105. FACILITY ADDRESS OR LOCATION WHERE FOUND (Street and number, or location) 2350 GLENDALE DR		106. CITY BLUE LAKE	
107. CAUSE OF DEATH Enter the chain of events --- diseases, injuries, or complications --- that directly caused death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE. IMMEDIATE CAUSE (A) SUDDEN CARDIAC DEATH Sequentially list conditions, if any, leading to cause on Line A. Enter UNDERLYING CAUSE (B) SEVERE CORONARY ARTERY DISEASE AND HYPERTENSIVE HEART DISEASE 108. TIME INTERVAL BETWEEN Onset and Death (AT) MIN 202305433 109. BIOPSY PERFORMED? (BT) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO 110. AUTOPSY PERFORMED? (CT) <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO 111. USED IN DETERMINING CAUSE? (DT) <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO 112. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN 107 FATTY LIVER, OBESE, SPLENOMEGALY 113. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? (if yes, list type of operation and date) NO 114. I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED. Decedent Attended Since Decedent Last Seen Alive (A) mm/dd/yyyy (B) mm/dd/yyyy 115. SIGNATURE AND TITLE OF CERTIFIER 116. LICENSE NUMBER 117. DATE mm/dd/yyyy 118. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP CODE 119. I CERTIFY THAT IN MY OPINION DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED. MANNER OF DEATH <input checked="" type="checkbox"/> Natural <input type="checkbox"/> Accident <input type="checkbox"/> Suicide <input type="checkbox"/> Pending Investigation <input type="checkbox"/> Could not be determined 120. INJURED AT WORK? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK 121. INJURY DATE mm/dd/yyyy 122. HOUR (24 Hours) 123. PLACE OF INJURY (e.g., home, construction site, wooded area, etc.) 124. DESCRIBE HOW INJURY OCCURRED (Events which resulted in injury) 125. LOCATION OF INJURY (Street and number, or location, and city, and zip) 126. SIGNATURE OF CORONER / DEPUTY CORONER JAMIE BARNEY 127. DATE mm/dd/yyyy 12/07/2023 128. TYPE NAME, TITLE OF CORONER / DEPUTY CORONER JAMIE BARNEY, DEP CORONER			

This is a true and exact reproduction of the document officially registered and placed on file in the office of the Humboldt County Local Registrar.



C. Stockton, M.D.
CANDY STOCKTON, MD
HEALTH OFFICER AND LOCAL REGISTRAR
HUMBOLDT COUNTY, CALIFORNIA

DEC 08 2023

DATE ISSUED

This copy is not valid unless prepared on an engraved border, displaying the date, seal and signature of the County Health Officer.

