

Grantee's Name and Address
1600 N. 17th St., #4
McMinnville, OR 97128

Grantor's Name and Address
Otto L. Long, SR.
481 45th Place NE
Salem, OR 97301

After recording, return to (Name, Address, Zip):
Otto L. Long, SR.
481 45th Place NE
Salem, OR 97301

Until requested otherwise, send all tax statements to (Name, Address, Zip):
Otto L. Long, SR.
481 45th Place NE
Salem, OR 97301

170766

STATE OF OREGON,
County of } ss.
I certify that the within instrument
was received for record on the ____ day
of ____, 19____, at
____ o'clock ____ M., and recorded in
book/reel/volume No. ____ on page ____
and/or as fee/file/instru-
ment/microfilm/reception No. ____
Records of said County.
Witness my hand and seal of County
affixed.

By _____ Deputy.
NAME _____
TITLE _____

BARGAIN AND SALE DEED

KNOW ALL BY THESE PRESENTS that Imo D. Farrester
hereinafter called grantor, for the consideration hereinafter stated, does hereby grant, bargain, sell and convey, unto
Otto L. Long, SR., and Nina L. Long, his husband and wife
hereinafter called grantee, and unto grantee's heirs, successors and assigns, all of that certain real property, with the tenements, hereditaments and appurtenances thereunto belonging or in any way appertaining, situated in _____
County, State of ~~Oregon~~ Nevada, described as follows, to-wit:

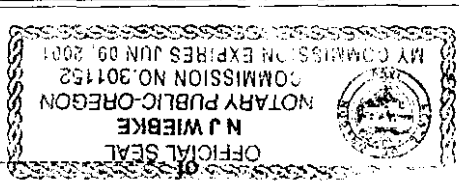
Township 29 North, Range 18 East, M.D.B. & M.
Section 29; N 1/2 SE 1/4 NE 1/4, as shown upon Record of Survey
of Crescent Valley Ranch and Farm, Unit No. 5 filed in the
Office of the Fureka County Recorder on November 5, 1959.

BOOK 321 PAGE 548
OFFICIAL RECORDS
RECORDED AT THE REQUEST OF
First American Title
98 OCT 14 AM 11:54
EUREKA COUNTY HEVADA
M.N. REBALEATI, RECORDER
FILE NO. 170766
FEES 7.00

To Have and to Hold the same unto grantee and grantee's heirs, successors and assigns forever.
The true and actual consideration paid for this transfer, stated in terms of dollars, is \$ ____
actual consideration consists of or includes other property or value given or promised which is ☐ part of the ☒ the whole (indicate which) consideration. (The sentence between the symbols "o", if not applicable, should be deleted. See ORS 93.030.)
In construing this deed, where the context so requires, the singular includes the plural, and all grammatical changes shall be made so that this deed shall apply equally to corporations and to individuals.
IN WITNESS WHEREOF, the grantor has executed this instrument this ____ day of September, 1998; if grantor is a corporation, it has caused its name to be signed and its seal, if any, affixed by an officer or other person duly authorized to do so by order of its board of directors.
THIS INSTRUMENT WILL 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 APPROVED USES AND TO DETERMINE ANY LIMITS ON LAWSUITS AGAINST FARMING OR FOREST PRACTICES AS DEFINED IN ORS 30.930.

STATE OF OREGON, County of Klamath
This instrument was acknowledged before me on 9-11, 1998, by Imo D. Farrester
This instrument was acknowledged before me on ____ by ____
as _____
by _____
Notary Public for Oregon
My commission expires 6-5-01

BOOK 321 PAGE 548



DECLARATION OF VALUE

Eureka COUNTY, NEVADA

Recording Date 10/14/98 Book 321 Page 548 Instrument # 170764

Full Value of Property Interest Conveyed

\$ 1500.00

Less Assumed Liens & Encumbrances

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Taxable Value (NRS 375.010, Section 4)

\$

Real Property Transfer Tax Due

\$ 1.95

If exempt, state reason. NRS 375.090, Section 4. Explain:

☐ Escrow Holder only: Check if Real Property Transfer Tax is to be deferred under NRS 375.030, Section 3.

Under penalty of perjury, I hereby declare that the above statements are correct.

INDIVIDUAL

Imo D Forester

Signature of Declarant

Imo D Forester

Name (Please Print)

1600 N 17th St #4

Address

McMinnville OR 97128

City

State

Zip

City

State

Zip

Address

Firm Name

Escrow Number

Name (Please Print)

Signature of Declarant

Under penalty of perjury, I hereby declare that the above statements are correct to the best of my knowledge based upon the information available to me in the documents contained in the escrow file.

ESCROW HOLDER

* Tax paid for the above transfer per NRS 375.030 Sec. 3 on 10/14/98