

After Recording Return to:

Until a change is requested, please forward all tax statements to:

Tax Assessor's Account No.

FIDUCIARY DEED

[Trustee to Trustee]

KNOW ALL MEN BY THESE PRESENTS THAT:

Grantor : _____ (an individual) (a _____ Corporation)
whose address is _____,
as Trustee under the provisions of a trust agreement dated the _____ day of _____,
20_____, known as the _____ Trust, does hereby remise,
release and forever quitclaim unto

Grantee: _____ (an individual) (a _____ Corporation)
whose address is _____,
as Trustee under the provisions of a trust agreement dated the _____ day of _____,
20_____, known as the _____ Trust,

The following lands and property, together with all improvements located thereon, lying in the State of _____, to-wit:

- See Legal Description Attached as Exhibit A incorporated by reference as though set forth in full
 Legal Description:

Street Address of Real Property:

The true and actual consideration paid for this transfer, stated in terms of dollars, is
\$_____.

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. 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.

IN WITNESS WHEREOF, the grantor has caused this Deed to be executed on the date set forth above.

GRANTOR:
Signature of Individual Grantor

Signature

Type or Print Name

Signature block for entity Grantor

Name of Entity: _____

By: _____
Signature of authorized signatory

Type or Print Name: _____

Its: _____

Capacity of Signatory

STATE OF OREGON)
) SS.
County of _____)

The foregoing instrument was acknowledged before me this _____ (date) by
_____ (name of person acknowledged.)

Notary Public for Oregon

Type or Print Name

My Commission expires: _____

Grantor (*name, address and telephone*):

Grantee (*name, address and telephone*):

EXHIBIT A