A-31304 K-30223 FORM No TCLAIM DEED (Individual or Corporate)

1.1.7

89277

NG CO., PORTLAND

QUITCLAIM DEED VOI. 1980 Page 16865

KNOW ALL MEN BY THESE PRESENTS, That Robert P. Stewart and Patricia S. Stewart, husband and wife for the consideration hereinafter stated, does hereby remise, release and quitclaim unto....Lee.Michael.Cheyne and Mary Edna Cheyne, husband and wife

hereinafter called grantee, and unto grantee's heirs, successors and assigns all of the grantor's right, title and interest in that certain real property with the tenements, hereditaments and appurtenances thereunto belonging or in anywise appertaining, situated in the County ofKlamath......, State of Oregon, described as follows, to-wit:

Any portion of the SW4SW4 of Section 3 Township 40 South, Range 9 E.W.M. lying within the boundaries of the following described parcel: Starting at the section corner common to Sections 3, 4, 9 and 10 Township 40 S.R. 9 E.W.M.; thence North 89°50'30" East a distance of 1314.24 feet to the point of beginning; thence South 89°50'30" West a distance of 49.10 feet; thence North 1°02'30" East a distance of 1071.98 feet; thence North 89°55'30" East a distance of 661.30 feet; thence South 0 11'30" East a distance of 392.29 feet to the South line of the N¹₂SE¹₄SW¹₄; thence South 89°50'30" West along said line a distance of 649.24 feet; thence South 1°02'30" West a distance of 678.69 feet, more or less, to the point of beginning. All measurements are based on Survey Map #1430 filed in the office of the County Engineer

This deed is given for the purpose of clearing title to the above described parcel.

(IF SPACE INSUFFICIENT, CONTINUE DESCRIPTION ON REVERSE SIDE) To Have and to Hold the same unto the said grantee and grantee's heirs, successors and assigns forever. The true and actual consideration paid for this transfer, stated in terms of dollars, is \$_____none_____

"However, the actual consideration consists of or includes other property or value given or promised which is

The whole so the consideration (indicate which).⁽⁰⁾ (The sentence between the symbols ⁽⁰⁾, it not applicable, should be deleted. See ORS 93.030.) part of the consideration (indicate which).⁽⁰⁾ (The sentence between the symbols ⁽⁰⁾, it not applicable, should be deleted. See ORS 93.030.) In construing this deed and where the context so requires, the singular includes the plural and all grammatical changes shall be implied to make the provisions hereof apply equally to corporations and to individuals.

In Witness Whereof, the grantor has executed this instrument this 5.77. day of if a corporate grantor, it has caused its name to be signed and seal affixed by its officers, duly authorized thereto by

(If executed by a corporation, affix corporate seal)

STATE OF OREGON, Klamath

tept - 5 Personally appeared the above named Robert P. Stewart and Patricia S. Stewart

÷4 and acknowledged the foregoing instrument to be their voluntary act and deed. OFFICIAL Carolyn SEAL) DoVor Notary Public for Oregon

My commission expires: 3-20-81

eum nua X leu

STATE OF OREGON, County of, 19..... Personally appeared who, being duly sworn,

each for himself and not one for the other, did say that the former is the president and that the latter is thesecretary of

and that the seal attixed to the foregoing instrument is the corporation, of said corporation and that said instrument was signed and sealed in be-halt of said corporation by authority of its board of directors; and each of them acknowledged said instrument to be its voluntary act and deed.

Fee \$3.50

Notary Public for Oregon My commission expires:

(SEAL)

STATE OF OREGON. SS. GRANTOR'S NAME AND ADDRESS County of Klamath I certify that the within instrument was received for record on the5th...day ofSeptember...., 19.80., GRANTEE'S NAME AND ADDRESS at....12:18....o'clock.P...M., and recorded SPACE RESERVED After recording return in book/reel/volume No...M80......on FOR page 16865 as document/fee/file/ RECORDER'S USE CO instrument/microfilm No.89277....., Record of Deeds of said county. NAME, ADDRESS, ZIP Witness my hand and seal of ge is requested all fax statements shall be sent to the following address. County affixed. Wm:=D. Hilne TTLE NAME, ADDRESS, ZIP To ch Deputy By Jerne