| FORM No. 509-QUITCLAIM DEED-STATUTORY FORM (Individual Granter). | |
|---|---|
| ^{or} 36572 guite | LAIM DEED_STATUTORY FORMOL_mg_ Page 22403 |
| Robert E. Maloney, Jr. | INDIVIDUAL GRANTOR |
| releases and quitclaims toSheilaLaMerrill | |
| | |
| real property situated in | |
| W Klamath Falls Addition | |
| Lots 6 & 7, Blk 3 | |
| | |
| | |
| | |
| | |
| | |
| | |
| *Grantonia undividual de la companya | |
| *Grantor's undivided one-half interest, subject to existing encumbrances, property taxes, easements and liens. | |
| (IF SPACE INSUFFICIENT, CONTINUE DESCRIPTION ON REVERSE SIDE) | |
| The true consideration for this conveyance is \$1.00 (Here comply with the requirements of ORS 93.030) | |
| | |
| | |
| Dated this 30th day of September 1991 | |
| THIS INSTRUMENT WILL NOT ALLOW USE OF THE PRO | OPERTY DE- Robert E Malonov Tr |
| USE LAWS AND REGULATIONS. BEFORE SIGNING OR ACCEPTING | |
| PROPERTY SHOULD CHEEK WITH THE APPROPRIATE CITY OR COUNTY PLANNING DEPARTMENT TO VERIFY APPROVED USES. | |
| | |
| STATE OF OREGON, County of Multnomah) ss. Personally appeared the above named Robert E. Maloney, Jr. | |
| | |
| and acknowledged the foregoing instrument to be his voluntary act and deed. | |
| Before me: Mulu Kue | |
| (OFFICIAL SEAL) C Notary Public for Oregon-My commission expires: 2/20/94 | |
| | the second |
| C: QUITCLAIM DEED | |
| Robert"E. Maloney, Jr. Sheila LaMerrill GRANYOR | STATE OF OREGON, |
| 1316-A 14th Street GRANTER | County ofKlamath |
| Santa Rosa, CA 95404 | I certily that the within instru- |
| GRANTEE'S ADDRESS, ZIP After recording return to: | ment was received for record on the |
| Robert E. Maloney, Jr. | 28th day of |
| 520 SW Yamhill, Ste. 800 | in book/reel/volume No 01 |
| Portland, OR 97204 | page |
| NAME, ADDRESS, ZIP | ment/microfilm/reception No.36572, Record of Deeds of said county. |
| | Witness my hand and seal of |
| Until a change is requested, all tax statements shall be sent to the following address: | County affixed. |
| | Evelyn Biehn, County Clerk |
| | NAME TITLE |
| | By Queline 7 Mulinder Deputy |
| NAME, ADDRESS, ZIP | Fee \$28.00 |

ملاجه00