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59296 '93 APR -1 AM 9 47

RECORDING REQUESTED BY

AND WHEN RECORDED MAIL THIS DEED AND, UNLESS OTHERWISE SHOWN BELOW, MAIL TAX STATEMENTS TO:

NAME Teri A. Lundeen
STREET ADDRESS 679-Le Harve
CITY, STATE ZIP Lake Elsinore, Ca. 92530

Title Order No. _____ Escrow No. _____

STATE OF OREGON, County of Klamath ss.

Filed for record at request of:

Teri Lundeen

on this 1st day of April A.D., 19 93
at 9:47 o'clock A M. and duly recorded
in Vol. M93 of Deeds Page 6597.
Evelyn Biehn County Clerk
By Pauline Muchmore Deputy.

Fee, $30.00

DOCUMENTARY TRANSFER TAX $_____
☐ computed on full value of property conveyed, or
☐ computed on full value less value of liens and encumbrances remaining at the time of sale.

Signature of Declarant or Agent Determining Tax. Firm Name

QUITCLAIM DEED

Loretta E. Varish
(print or type name of grantor(s))

the undersigned grantor(s), for a valuable consideration, receipt of which is hereby acknowledged, do I hereby remise, release and forever quitclaim to Teri A. Lundeen

the following described real property in the City of , State of California: Oregon
County of Klamath

Lot 14, Block 35, as shown on map entitled Klamath Forest Estates Highway 66, Unit Plat #2

Assessor's parcel No. _____

Executed on March 23, 1993, at Lake Elsinore, California (City and State)

Loretta E. Varish
Loretta E Varish

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California
County of Riverside

On 3/23/93 (DATE) before me Patricia A. Cowan Notary Public (NAME, TITLE OF OFFICER - E.G., "JANE DOE, NOTARY PUBLIC")

personally appeared Loretta E. Varish (NAME(S) OF SIGNER(S))

☐ personally known to me - OR - ☐ proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Patricia A. Cowan
SIGNATURE OF NOTARY

OFFICIAL SEAL
PATRICIA A. COWAN
NOTARY PUBLIC-CALIFORNIA
COMMISSION NUMBER 978519
PRINCIPAL OFFICE IN RIVERSIDE COUNTY
MY COMMISSION EXP. NOV. 22, 1996

RBG-1 RBG-1

OPTIONAL SECTION
CAPACITY CLAIMED BY SIGNER
Though statute does not require the Notary to fill in the data below, doing so may prove invaluable to persons relying on the document.

☒ INDIVIDUAL
☐ CORPORATE OFFICER(S)
TITLE(S)
☐ PARTNER(S) ☐ LIMITED ☐ GENERAL
☐ ATTORNEY-IN-FACT
☐ TRUSTEE(S)
☐ GUARDIAN/CONSERVATOR
☐ OTHER: _____

SIGNER IS REPRESENTING:
NAME OF PERSON(S) OR ENTITY(IES)

OPTIONAL SECTION

THIS CERTIFICATE MUST BE ATTACHED TO THE DOCUMENT DESCRIBED AT RIGHT:

Though the data requested here is not required by law, it could prevent fraudulent reattachment of this form.

TITLE OR TYPE OF DOCUMENT Quit Claim Deed
NUMBER OF PAGES 1 DATE OF DOCUMENT 3/23/93
SIGNER(S) OTHER THAN NAMED ABOVE None

CK 30.00