

RECORDING REQUESTED BY

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

NAME
STREET
ADDRESS
CITY
STATE
ZIPTamra Scott
1209 N. Kings Rd. #7
Los Angeles, Ca. 90069

Title Order No. _____ Escrow No. _____

STATE OF OREGON, ss.
County of Klamath

Filed for record at request of:

on this 8th day of July A.D. 19 93
at 11:08 o'clock A.M. and duly recorded
in Vol. M93 of Deeds Page 16384

Evelyn Biehn County Clerk

By Dan Dudek

Deputy.

Fec. \$30.00

QUITCLAIM DEED

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

Theresa A. Fitz Simmons

(print or type name of grantor(s))

the undersigned grantor(s), for a valuable consideration, receipt of which is hereby acknowledged, do hereby remise,

release and forever quitclaim to Tammy R. Scott my 1/4 interest inthe following described real property in the City of KLAMATH
County of KLAMATH, State of OREGONAssessor's parcel No. 2-3612-02800-00100-000Executed on June 9, 19 93, at Simi Valley, CaliforniaTheresa A. Fitz Simmons

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

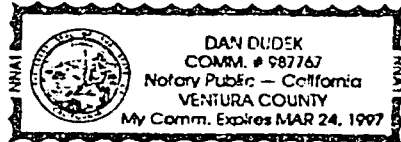
State of CALIFORNIACounty of VENTURAOn 9 JUNE 1993 before me, DAN DUDEK / NOTARY PUBLIC

DATE NAME, TITLE OF OFFICER, E.G., "JANE DOE, NOTARY PUBLIC"

personally appeared THERESA A. FITZ SIMMONS

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.

Dan Dudek

SIGNATURE OF NOTARY

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)

SELF

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

OPTIONAL SECTION

TITLE OR TYPE OF DOCUMENT QUITCLAIM DEEDNUMBER OF PAGES 1 DATE OF DOCUMENT JUNE 9, 1993

SIGNER(S) OTHER THAN NAMED ABOVE _____