

72812

RECORDING REQUESTED BY

ANN-MARIE CUKROV, ESQ.
AND WHEN RECORDED MAIL THIS DEED AND, UNLESS
OTHERWISE SHOWN BELOW, MAIL TAX STATEMENTS TO:

NAME
STREET
ADDRESS
CITY
STATE
ZIP

BENITA GOLD
11631 Granmere Ct.
Riverside, CA 92503

Title Order No. _____ Escrow No. _____

STATE OF OREGON
County of Klamath ss.

Filed for record at request of:

Ann-Marie Cukrov

on this 15th day of Dec. A.D., 19 93
at 9:44 o'clock A M. and duly recorded
in Vol. M93 of Deeds Page 33278

Evelyn Biehn County Clerk

By Dorene Miller Deputy

Fee, \$30.00

QUITCLAIM DEED

DOCUMENTARY TRANSFER TAX \$ -0- (Interspousal transfer)

- ☐ 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

CHARLES GOLD

(print or type name of grantor(s))

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

release and forever quitclaim to BENITA L GOLD, a married woman as her sole and
separate property

the following described real property in the City of

County of KLAMATH

State of OREGON and more particularly

described as follows:

Lots # 3 & 4, Block 40 of the fourth addition to Nimrod
River Park, Sprague River Oregon.

Subject to reservatrion, restrictions, easements,
conditions, rights, rights of way of record.

Assessor's parcel No. _____

Executed on Oct. 7, 19 93 at Riverside, California

Charles Gold
CHARLES GOLD

STATE OF CALIFORNIA

COUNTY OF Riverside

ss.

On 10/7/93 before me, RAPLH K. HEKMAN,
(Name, title of officer-i.e., "Jane Doe, Notary Public")

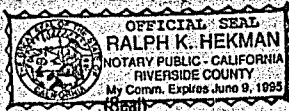
Notary Public

personally appeared CHARLES GOLD

personally known to me (or proved to me on the basis of satisfac-
tory evidence) to be the person(s) whose name(s) is/are sub-
scribed 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 instru-
ment the person(s), or the entity upon behalf of which the person(s)
acted, executed the instrument.

WITNESS my hand and official seal

Signature



RIGHT THUMBPRINT (OPTIONAL)

TOP OF THUMB HERE

CAPACITY CLAIMED BY SIGNER(S)

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

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

MAIL TAX
STATEMENTS TO Benita Gold, 11631 Granmere, Riverside, CA 92503

NAME

ADDRESS

ZIP