

76815 RECORDING REQUESTED BY

AND WHEN RECORDED MAIL THIS DEED AND, UNLESS
OTHERWISE SHOWN BELOW, MAIL TAX STATEMENTS TO:NAME
STREET
ADDRESS
CITY,
STATE
ZIPMichael H. Shields and
Michael D. Murphy
22560 Cascade Drive
Canyon Lake, CA 92587

Title Order No. _____ Escrow No. _____

STATE OF OREGON, Vol. M94 Page 6322
County of Klamath ss.

Filed for record at request of:

on this 28th day of February A.D., 19 94
at 2:11 o'clock PM and duly recorded
in Vol. M94 of Deeds Page 6322
Evelyn Biehn County Clerk
By Annette Mueller
Deputy.

Fee, \$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

TERI A. LUNDEEN

(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 MICHAEL H. SHIELDS, a single man and MICHAEL D.
MURPHY, an unmarried man AS JOINT TENANTS

the following described real property in the City of

County of

Klamoth

State of California: Oregon

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

Assessor's parcel No. _____

Executed on February 18, 1994 at Lake Elsinore, CA

(City and State)

Teri A. Lundeen

Acknowledgement

State of CALIFORNIACounty of Riverside

} ss.

On Feb 18 1994 before me, Barla L. Rocovits
a Notary Public
personally appeared Teri A. Lundeen

(This area for official seal)

personally known to me (or proved to me on the basis of satisfactory evidence) to be
the person(s) whose name(s) is subscribed to the within instrument and acknowl-
edged 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.

Signature

Barla L. Rocovits

ATTENTION NOTARY: Although the information requested below is OPTIONAL, it could prevent fraudulent attachment of this certificate to another document

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

Title or Type of Document _____

Number of Pages _____ Date of Document _____

Signer(s) Other Than Named Above _____