04-13-94P03:50 RCVD STEVENS NESS LAW PUBLISHING CO., PORTLAND, OR 873 FORM No. 969 - OUTCLAIM DEED - STATUTORY FORM (Individual Grantor). M 179087 INDIVIDUAL GRANTOR Grantor. Achim & Arlette Bassler _____ ----releases and quitclaims to A.B. Inc. , Grantee, all right, title and interest in and to the following described real property situated in Klamath County, Oregon, to-wit: (R-3909-003AD-01700-000) Balsiger Tracts, Lot 77 Thru 80 Address 3927 So. Sixth Street Klamath Falls, OR 97603 (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, 19...... THIS INSTRUMENT WILL NOT ALLOW USE OF THE PROPERTY DESCRIBED IN THIS INSTRUMENT IN VIOLATION OF APPLICABLE LAND USE LAWS AND REGULATIONS. BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON ACQUIRING FEE TITLE TO THE PROPERTY SHOULD CHECK WITH THE APPROPRIATE CITY OR COUNTY PLANNING DEPARTMENT TO VERIFY APPROVED USES AND TO DETERMINE ANY LIMITS ON LAWSUITS AGAINST FARMING OR FOREST PRACTICES AS DEFINED IN OPS 30035 ORS 30,930. <u>l'unninglan</u> JUmn. by Notary Public for Oregon OFFICIAL SEAL LYNN F. CUNNINGHAN NOTARY PUBLIC-OREGON COMMISSION NO. 031227 COMMISSION EVOLOGIC LINE OF QUITCLAIM DEED STATE OF OREGON, Achim & Arlette Bassler SS. CRANTOR County ofKlamath <u>A.B. Inc.</u> GRANTER I certify that the within instru-3927 S. Sixth St 97603 Klamath Falls, OR ment was received for record on the ORANTER'S ADDRESS, ZIP After recording return to: at3:50 ... o'clock P M., and recorded in book/reel/volume No.M94...... on Achim Bassler E RESERVED 3927 S. ¢th St page 11062..... or as fee/file/instru-EO # Klamath Falls, OR 97603 ment/microfilm/reception No...79087.., RECORDER'S USE Record of Deeds of said county. NAME, ADDRESS, ZIP Witness my hand and seal of County affixed. Until a change is requested, all tax statements shall be sent to the following address: 3927 So. Sixth StEvelyn.Biehn, County Clerk Klamath Falls OR 97603 B Quelene Mullender Deputy NAME ADDRESS. ZIP Fee \$30.00