

RECORDING REQUESTED BY

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

NAME Marion C. Clark
STREET ADDRESS 277 Pleasant St., #307
CITY Pasadena, CA 91101
STATE CA ZIP 91101

Title Order No. _____ Escrow No. _____

STATE OF OREGON,
County of Klamath ss.

Filed for record at request of:

Marion Clark
on this 2nd day of May A.D., 19 94
at 11:12 o'clock A M. and duly recorded
in Vol. M94 of Deeds Page 13694

Evelyn Biehn County Clerk

By Dorlene Mulendore

Deputy.

Fee, \$30.00

SPACE ABOVE THIS LINE FOR RECORDER'S USE

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

DELTA B. CARDOZA, a widow

(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 The Marion C. Clark Trust

the following described real property in the City of

County of KlamathState of Oregon

Lot 36 in Block 13 OREGON SHORES SUBDIVISION - Tract 1053, in
the County of Klamath, State of Oregon, as shown on the map
filed on October 3, 1973, in Volume 20, pages 21 and 22 of
MAPS in the office of the County Recorder of Said County.

Assessor's parcel No. _____

Executed on April 23, 1994, at Pasadena, California

(City and State)

Delta B. Cardoza

STATE OF California }
COUNTY OF Los Angeles } ss.

On April 23 94 before me, Sandra J. Arellano

(Name, title of officer - i.e., "Jane Doe, Notary Public")

personally appeared Delta B. Cardoza

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.

Sandra J. Arellano
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

MARION C. CLARK 277 PLEASANT #307 PASADENA, CALIF.
NAME ADDRESS ZIP

