

84602

07-21-94 10:42 RCVD

RECORDING REQUESTED BY

Volm 94 Page 22325

AND WHEN RECORDED MAIL TO

Name

Street  
AddressCity &  
State

Mary Gale Smith  
3994 Coeur D'Alene  
Shasta Lake, Ca. 96019

SPACE ABOVE THIS LINE FOR RECORDER'S USE

## MAIL TAX STATEMENTS TO

Name

Street  
AddressCity &  
State  
Zip

M  
Mary Gale Smith  
3994 Coeur D'Alene  
Shasta Lake, Ca. 96019

## DOCUMENTARY TRANSFER TAX \$

COMPUTED ON FULL VALUE OF PROPERTY CONVEYED,  
OR COMPUTED ON FULL VALUE LESS LIENS AND  
ENCUMBRANCES REMAINING AT TIME OF SALE.

Signature of Declarant or Agent determining tax. Firm Name

## Quitclaim Deed

I, B.E. Smith, quitclaim to Mary Gale Smith  
all my right, title, and interest in the real property situated in the City of Bly  
(or in an unincorporated area of) Klamath County, Oregon County, California,  
with the legal description as follows: N 1/2 SE 1/4 of Section 3, Township 38 South,  
Range 16 East of The Willamette Meridian, Klamath County, Oregon

Executed on \_\_\_\_\_, in the City of \_\_\_\_\_,  
in the State of \_\_\_\_\_

B.E. Smith  
(Signature of Grantor)

B.E. Smith

(Typed Name)

Mary Gale Smith  
(Signature of Grantee, Optional)

Mary Gale Smith

(Typed Name)

This document is only a general form which may be proper for use in simple transactions and in no way acts, or is intended to act, as a substitute for the advice of an attorney. The printer does not make any warranty, either express or implied, as to the merchantability or fitness for a particular purpose, or as to the legal validity of any provision or the suitability of these forms in any specific transaction.

**CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT**

**22326**

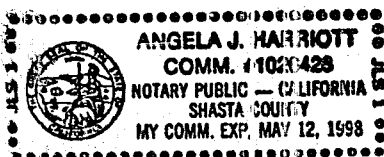
No. 5907

State of CALIFORNIA

County of SHASTA

On July 5, 1994 before me, ANGELA J. HARRIOTT  
DATE NAME, TITLE OF OFFICER - E.G., "JANE DOE, NOTARY PUBLIC"  
 personally appeared B. E. Smith and Mary Gale Smith  
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.

Angela J. Harriott  
SIGNATURE OF NOTARY

**OPTIONAL**

Though the data below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent reattachment of this form.

**CAPACITY CLAIMED BY SIGNER**

- ☐ INDIVIDUAL  
☐ CORPORATE OFFICER  
TITLE(S)  
☐ PARTNER(S) ☐ LIMITED  
☐ GENERAL  
☐ ATTORNEY-IN-FACT  
☐ TRUSTEE(S)  
☐ GUARDIAN/CONSERVATOR  
☐ OTHER: \_\_\_\_\_

**DESCRIPTION OF ATTACHED DOCUMENT**

Quit Claim Deed  
TITLE OR TYPE OF DOCUMENT  
1  
NUMBER OF PAGES  
7/5/94  
DATE OF DOCUMENT

STATE OF OREGON: COUNTY OF KLAMATH: ss.

Filed for record at request of Mary Gale Smith the 21st day  
 of July A.D., 19 94 at 10:42 o'clock A.M., and duly recorded in Vol. M94  
 of Deeds on Page 22325

FEE \$35.00

Evelyn Biehn - County Clerk  
 By Candace Mullendore