89900 10-20-94A11:38 RCID RECORDING REQUESTED BY STATE OF OREGON. Volmey Page 3267 County of Klamath ss. AND AND WHEN RECORDED MAIL THIS DEED AND, UNLE 3S Filed for record at request of: OTHERWISE SHOWN BELOW, MAIL TAX STATEMENT TO Tim F. Ray NAME TIM F. RAY 20th day of _ Oct A.D., 19 94 STREET at <u>11:38</u> ADDRESS P.O. BOX "T" o'clock AM. and duly recorded in Vol. ____M94 CITY, STATE & of <u>Deeds</u> Page 32677 Eve yn Biehn ZIP CODE CAVE JUNCTION, OR. 97523 County Clerk By Daniere Mulendre QUITCI AIM DEED DOCUVENTARY TRANSFER TO THE DOCUMENTARY TR Fee, QUITCLAIM DEED DOCUMENTARY TRANSFER TAX \$ NONE (This conveyance is conjuted on full value or property conveyed, or in dissolution conjuted on full value less liens and of marriage by one of marriage by one Signature of Declarant or Agent Determining Tax Firm Name Dome R&T 11927). IRENE E. RAY the undersigned grantor(s), for a valuable consideration, receipt of which is hereby acknowledged, do hereby remise, release and forever quitclaim to TIM F. RAY the following described real property in the City of INAME OF GRAFIT EISH County of KLAMATH . State of OREGON Lot 16 and Lot 17, Block 24, Klamath Forest Estates, as recorded in Klamath County Oregon and also subject to all conditions, restrictions, reservations, easements, exceptions, rights and/or rights of way affecting R3510-023A0-()1100-000 said property. (CITY AND STATE) STATE OF _ California COUNTY OF Los Angeles 1994 before me, MARBAKET M HOWAK'S -NOTARY PUBLIC RIGHT THUMBRINT (Optional) personally known to me (or proved to me on the basis of satisfact ary evidence) to be personally known to me (or proved to me on the priss of satisfact by evidence) to be the person(s) whose name(s) (s) are subclibed to the within instrument and acknowledged to me that he (she) they executed the same in his either authorized capicity less), and that by his/her/their OFFICIAL NOTARY SEAL sign ature (s) on the instrument the person(s), MARGARET M HOWARD or the entity upon befalf of which the Nictary Public — California pers on(s) acted, execute 1 the instrumer LOS ANGELES COUNTY CAPACITY CLAIMED BY SIGNER(S) My Comm. Exp. JUN 14,1995 MINDIVIDUAL(S) WITHESS my hand and tifficial seal. CORPORATE OFFICER(S) MAIL TAX PARTNER(S) | LIMITED S STATURE OF NOTARY STATEMENT'S TO: GENERAL ☐ ATTORNEY IN FACT TRUSTEE(S) Before you use this form, fill in all blanks, and make whatever changes are appropriate and necessary to your particular transaction. Consult a leavyer if you doubt the form is fire ass for your purpose, and use. Wolcotts makes no representation or warranty, express or implied, with respect to the merchantal tity or fitness of this impression in the contents of th GUARDIAN/CONSERVATOR OTHER ____ SIGNER IS PEPRESENTING: WOLCOTTS FORM 790 - Rev. 3-94 (price class 3A) INAME OF PERSONIS) OR ENTITY(IES) ©1994 WOLCOTTS FORMS, INC.

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