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RECORDING REQUESTED BY

10-20-94 11:38 RCD

STATE OF OREGON

County of Klamath ss.

Vol. M94 Page 32678

King, Shapiro, Mittelman & Buchman

Filed for record at request of:

King, Shapiro et al

on this 20th day of Oct A.D., 19 94
at 11:38 o'clock A M. and duly recorded
in Vol. M94 of Deeds Page 32678

Evelyn Biehn County Clerk

By Pauline Mulendore

Fee, \$30.00

Deputy.

AND WHEN RECORDED MAIL TO:

Name WARREN K. PERA, TRUSTEE(S)
Street Address BERNIECE N. PERA, TRUSTEE(S)
City, State Zip P. O. Box 1258
Bodega Bay, CA 94923

Quitclaim Deed

THIS FORM FURNISHED BY TRUSTEES SECURITY SERVICE

GD 889 ID

181619

The undersigned Grantor(s) declare(s) under penalty of perjury that the following is true and correct:
Documentary transfer tax is \$ NONE: ONLY CHANGE IN FORM OF OWNERSHIP.
() computed on full value of property conveyed, or
() computed on full value less value of liens and encumbrances remaining at time of sale.☒ Unincorporated area: () City of _____, andFOR A VALUABLE CONSIDERATION, receipt of which is hereby acknowledged,
WARREN K. PERA AND BERNIECE PERAhereby REMISE(S), RELEASE(S) AND FOREVER QUITCLAIM(S) to WARREN K. PERA AND
BERNIECE N. PERA, TRUSTEE(S) OF THE WARREN K. PERA FAMILY REVOCABLE
TRUST Dated September 1, 1994

the following described real property in the County of

Klamath

State of OregonLot 26, Block 5, Tract 1145 of Nob Hill, a Resubdivision of portions
of Nob Hill, Irvington Heights, Mountain New Addition and Eldorado
Heights in the City of Klamath Falls, according to the official plat
thereof on file in the office of the County Clerk of Klamath County,
Oregon.SUBJECT TO: Reservations, restrictions and rights of way of record
or apparent on the face of the land.
Dated October 7, 1994

State of California

County of SonomaOn October 7, 1994before me, JUDITH A. GRESSpersonally appeared Warren K. Pera and
Berniece Perapersonally 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.

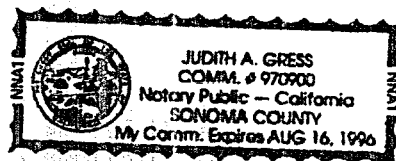
WITNESS my hand and official seal.

Signature Judith A. GressMAIL TAX
STATEMENTS TO:

NAME

ADDRESS

CITY, STATE, ZIP



ASSESSORS PARCEL NO.