

NA

12-27-94A11:37 RCVD

QUITCLAIM DEED

STATUTORY FORM

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CORPORATE GRANTOR

WESTERN TIMBER CO.

a corporation duly organized and existing under the laws of the State of Oregon, Grantor,
release and quitclaims to CONIFER TIMBERGrantee, all right, title and interest in and to the following described real property,
situated in Klamath County, Oregon, to-wit:

See Exhibit A hereto.

(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)

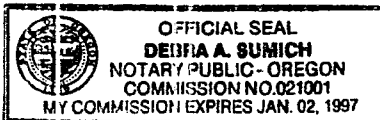
Done by order of the grantor's board of directors with its corporate seal, if any, attixed on December 20, 1994.

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 ORS 30.931.

WESTERN TIMBER CO.

By Robert J. Riecke, President
Its: Secretary

STATE OF OREGON, County of Washington ss.

This instrument was acknowledged before me on December 20, 1994,
by Robert J. Riecke
as Secretary
of Western Timber Co.

Debra A. Sumich

Notary Public for Oregon

My commission expires 1/2/97

Western Timber Co.

P.O. Box 5805

Portland, OR 97228

Grantor's Name and Address

Conifer Timber

Fill in
the Blanks

After recording return to (Name, Address, Zip):

Conifer Timber

(same as above)

Until requested otherwise send all tax statements to (Name, Address, Zip):

Conifer Timber

(same as above)

SPACE RESERVED
FOR
RECORDER'S USESTATE OF OREGON, } ss.
County of }I certify that the within instrument
was received for record on the day
of 19, at
o'clock M., and recorded in
book/reel/volume No. on page
and/or as fee/file/instru-
ment/microfilm/reception No.
Record of Deeds of said County.Witness my hand and seal of
County affixed.By NAME TITLE
Deputy

