

96 DEC 30 AM 50

RECORDING REQUESTED BY:
Alliance for Mature Americans

WHEN RECORDED, MAIL TO:

~~SEAN M. MULLIN~~
~~1335 WEST 35TH STREET~~
~~SAN PEDRO, CA 90731~~

SPACE ABOVE THIS LINE FOR RECORDER'S USE

QUITCLAIM DEED

The undersigned grantor(s) declare(s): This conveyance transfers the grantor's interest into a Revocable Living Trust. There is no consideration for this transfer and is excluded from reappraisal. (Documentary Transfer Tax - 0 -)

Selma H. Malloch, a widow,

hereby REMISES, RELEASES AND QUITCLAIMS to:

Selma H. Malloch, as Trustor(s) and Trustee(s) of
The Malloch Living Trust Dated _____, 1996.

the following described real property in the County of Klamath, State of Oregon

North ½, Southwest ¼, Southeast ¼, Northwest ¼ of Section 16, Township 28 South., Range 8 East, W. M., containing five acres, M-L, subject to the rights of ingress and egress along the East, North, West and South lines.

More commonly known as: Property in Klamath County, OR

DATED: _____

Selma H. Malloch
Selma H. Malloch

STATE OF _____)

) ss.

COUNTY OF _____)

On _____ before me, _____, personally appeared, Selma H. Malloch, 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 this instrument the person(s) or the entity upon behalf of which person(s) acted, executed the instrument.

WITNESS my hand and official seal

Signature _____

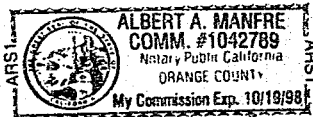
Mail Tax Statements to: Selma Malloch
Name

1335 West 35th Street, San Pedro, CA 90731
Address City, State & Zip

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California
 County of Orange
 On Sept 14, 1996 before me, Albert A. Manfre
Date Name and Title of Officer (e.g., "Jane Doe, Notary Public")
 personally appeared Selma H Malloch
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.

OPTIONAL

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

Description of Attached Document

Title or Type of Document: _____

Document Date: _____ Number of Pages: _____

Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: _____

- ☐ Individual
☐ Corporate Officer
 Title(s): _____
☐ Partner — ☐ Limited ☐ General
☐ Attorney-in-Fact
☐ Trustee
☐ Guardian or Conservator
☐ Other: _____

Signer Is Representing: _____

RIGHT THUMBPRINT
OF SIGNER
Top of thumb here

Signer's Name: _____

- ☐ Individual
☐ Corporate Officer
 Title(s): _____
☐ Partner — ☐ Limited ☐ General
☐ Attorney-in-Fact
☐ Trustee
☐ Guardian or Conservator
☐ Other: _____

Signer Is Representing: _____

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STATE OF OREGON : COUNTY OF KLAMATH: ss.

Filed for record at request of Alliance for Mature Americans the 30th day
 of December A.D., 19 96 at 10:50 o'clock A. M., and duly recorded in Vol. M96
 of Deeds on Page 40214

Bernetha G. Letsch, County Clerk

FEE \$35.00

Return: Conveyance Dept.
 24551 Raymond Way Ste 180
 Lake Forest, Ca. 92630

by

Kathleen Ross