

32497

RECORDING REQUESTED BY

Vol. 1797 Page 3767

'97 FEB -7 A9:42

AND WHEN RECORDED MAIL THIS DEED AND, UNLESS
OTHERWISE SHOWN BELOW, MAIL TAX STATEMENT TO:NAME FISKE, KEVIN L. & SONALI B.
STREET ADDRESS 7834 NEWMAN AVE
HUNTINGTON BEACH, CA 92647
CITY, STATE &
ZIP CODE
TITLE ORDER NO. _____ ESCROW NO. _____

SPACE ABOVE THIS LINE FOR RECORDER'S USE

QUITCLAIM DEED

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

ROBERT G. FISKE AND MADELEINE L. FISKE
(NAME OF GRANTOR(S))the undersigned grantor(s), for a valuable consideration, receipt of which is hereby acknowledged, do/ hereby remise, release and
forever quitclaim to KEVIN L. FISKE AND SONALI B. FISKE
(NAME OF GRANTEE(S))the following described real property in the City of SPRAGUE RIVER, County of KLAMATH, State of OR:
BLOCK 66, LOT 100 OF THE 5TH ADDITION AT NIMROD RIVER PARK.

PROP: R338664 R-3611-00100-00400-000 010

Assessor's parcel No. O.R.S. 312.040

Executed on _____, at _____

STATE OF _____

COUNTY OF _____

On _____ before me, _____

(NAME/TITLE, I.e., "JANE DOE, NOTARY PUBLIC")
personally appeared _____ 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.

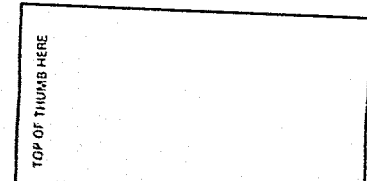
WITNESS my hand and official seal.

(SIGNATURE OF NOTARY)

(SEAL)

MAIL TAX
STATEMENTS TO: _____Before you use this form, fill in all blanks, and make whatever changes are appropriate and necessary to your particular
transaction. Consult a lawyer if you doubt the form's fitness for your purpose and use. Wolcotts makes no
representation or warranty, express or implied, with respect to the merchantability or fitness of this form for an
intended use or purpose.WOLCOTTS FORM 790 ©1994 WOLCOTTS FORMS, INC.
QUITCLAIM DEED Rev. 3-94b (price class 3A)

RIGHT THUMBPRINT (Optional)

CAPACITY CLAIMED BY SIGNER(S)
☐ INDIVIDUAL(S)
☐ CORPORATE
OFFICER(S) _____(TITLES)
☐ PARTNER(S) ☐ LIMITED
☐ GENERAL☐ ATTORNEY IN FACT
☐ TRUSTEE(S)
☐ GUARDIAN/CONSERVATOR
☐ OTHER: _____SIGNER IS REPRESENTING:
(Name of Person(s) or Entity(ies))

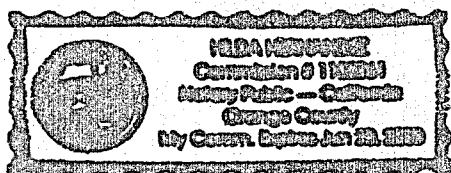
_____40-
95-

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

3768

State of CALIFORNIA
 County of ORANGE
 On JAN 10, 1997 before me, HILDA VERNANDEZ NOTARY PUBLIC
Date Name and Title of Officer (e.g., "Jane Doe, Notary Public")
 personally appeared ROBERT GORDON FISKE AND MADELINE LOUISE FISKE
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.

Hilda Hernandez
Signature of Notary Public

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: QUITCLAIM DEED
 Document Date: NONE Number of Pages: 1

Signer(s) Other Than Named Above: NONE

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: _____

RIGHT THUMBPRINT OF SIGNER
 Top of thumb here

Signer Is Representing: _____

Signer's Name: _____

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

RIGHT THUMBPRINT OF SIGNER
 Top of thumb here

Signer Is Representing: _____

STATE OF OREGON : COUNTY OF KLAMATH: ss.

Filed for record at request of Kevin Fiske the 7th day of February A.D., 19 97 at 9:42 o'clock A. M., and duly recorded in Vol. M97 of Deeds on Page 3767.

FEE \$35.00

by Bernetha G. Letsch, County Clerk
Kathleen R. 221